"Almost as bad as Ireland":
Saint John, 1847

by Jim Whalen

In the 1840s death and emigration depleted the population of Ireland. In 1846, the time of the failure of the potato crop, widespread destitution followed by famine occurred. An epidemic of fever and dysentery broke out, and thousands died not only from hunger, but from disease. It was believed that the only way to escape the misery of the country was to emigrate, and in the spring of 1847 thousands made their way to Irish ports, and to Liverpool, in preparation for the journey. The exodus was unequalled in the history of Ireland as over 100,000 emigrated to British North America alone. For the most part, they came from areas in which the disease was epidemic, and if they escaped fever before leaving, or on the ocean voyage, it often broke out after their arrival in the new land. It was anticipated that large numbers would arrive in a destitute and weakened condition, but the British colonies were not expecting such a heavy influx and were not prepared to cope with it. A Committee of the Saint John Common Council stressed that neither the Emigrant Officer, nor anyone else,

...could have possibly imagined that loads of pauper emigrants would have been shipped from different Irish ports and from Liverpool, worn out with poverty and disease, and labouring under fever of a most infectious and malignant description. The difficulties came upon us like a thunderbolt.¹

In February 1847, the Government Emigration Officer at Saint John, Moses H. Perley, pointed out the urgent need for better accommodations at the quarantine station which was located on Partridge Island about two miles from the city. It was controlled by the Saint John Common Council under terms of the city’s Charter of Incorporation of 1785, and regulations required that all ships with passengers anchor there for medical inspection. On it stood two fever sheds both of which were in poor condition and together would only accommodate about 100 people.² Before repairs were made to these buildings, or increased accommodations provided, ships with fever and dysentery on board began arriving in quarantine. It was discovered sadly that on many of them passengers had died during the voyage.


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The first emigrant vessel, the MIDAS, arrived from Galway on 5 May with 163 passengers. During the passage ten died and others were sick with fever. Other vessels followed with passengers generally in good health, but the situation soon changed for the worse. On the 16 May, the ALDEBARAN landed from Sligo with 418 passengers. Of these, 36 died on route, 105 were sick on arrival, and more than 80 of them subsequently died in quarantine. A few days later, on 22 May, the PALLAS put in from Cork having on board 31 cases of fever among the 204 passengers. Only one person died during the voyage, but 27 died after landing including the Captain, Robert Hall. Then, on the 24 May, the AMAZON came in from Liverpool with 262 passengers. Two passengers had died on route, 34 were ill on landing, and the mortality on Partridge Island was 55.3

By early June, the sheds at the quarantine station were crowded with fever patients—"the floors of every ward being completely covered to the very doors." A total of 2,471 emigrants were in quarantine at this time, but many of them were still on board vessels waiting to be landed.4 It was obvious that facilities had to be found elsewhere. As a temporary measure, military tents were used to shelter the sick, and in the absence of receiving sheds, they provided refuge to healthy emigrants during the time required for the purification of vessels. These too were soon filled and some masters became so anxious to land their passengers that they made additional tents from sails of vessels.5

Ordinarily tents were floored with boards and those living in them were supplied with cots. They were quite adequate during fine weather, but afforded insufficient protection when it was cold and damp. At times when there was no flooring in them, and no cots provided, patients were forced to sleep on a bedding of straw, spruce boughs, or even the bare ground. Others made shelters out of a few boards, and some were exposed to cold and dampness in the open air with no covering except their wearing apparel.6 This situation induced some emigrants to burn the fences around the grounds of the lighthouse keeper and even a supply of wooden bedsteads for fuel.7 The want for accommodations prevented the immediate removal of emigrants from vessels in quarantine. Their confinement on board, with the sick, convalescent, and healthy crowded together, often caused the disease to spread more rapidly at anchor than on the passage. This was attributed to the lack of ventilation on stationary vessels, as it was believed the ocean breezes purified the air and reduced the danger of infection.8 Also, there was no medical officer on board most vessels because, under the provisions of the Passenger Act of 1842, they were not required to carry one.

Eventually carpenters, at great risk to their health, constructed two additional fever sheds, one two stories high, the other one story, and each 100 feet long by 20 feet wide.9 They were totally unsuitable for hospital purposes, because they were

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3 C.O. 188/100, 14 May 1847, encl. 1 and 11 June, encls. 6 and 7. The number of emigrants who died in quarantine from the above mentioned vessels, is obtained from lists published in The New Brunswick Courier, Saint John. [hereafter The Courier]
4 C.O. 188/100, 11 June 1847, encl. 1.
5 C.O. 188/101, 6 July 1847, encl. 1.
6 Ibid., 28 September 1847, encl. 3.
7 Ibid., 6 July 1847, encl. 1 and 14 September 1847.
8 Ibid., 6 July 1847, encl. 1.
9 C.O. 188/102, 27 October 1847, encl. 7 and New Brunswick Museum, Saint John, Plan of Partridge Island, Crown Land Office, Fredericton, 6 October 1847.
so narrow that there was hardly any space between the beds of the crowded wards. Patients suffering from different stages of fever, and many in a dying state, were often jammed together with convalescents. Usually, they slept on the floor, males and females in the same room; with their chests, boxes, and other personal effects scattered around them; congesting the main passageways. One of the buildings had no covering on the outer walls, and it was impossible to hire carpenters to complete it due to their fear of the disease. Some patients, therefore, suffered from exposure especially during inclement weather. 10 Dr. George J. Harding, the Health Officer in charge of the quarantine station, resided on the Island during the emigration season. He carried out the medical inspection of passenger vessels, and if he detected disease on board, the sick were removed to one of the fever hospitals. The healthy remained in quarantine for a relatively short period of time, as they were allowed to go up to the city once they were cleansed and the vessel in which they arrived was cleaned and fumigated. This appeared to be the best system for insuring that they reached the city in seemingly good health.

10 C.O. 188/101, 28 September 1847, encl. 3.
Early in June, with the fever sheds full and the overflow crowded into tents, the duties of the Health Officer became so burdensome that he could not handle the responsibilities alone. Although it was extremely difficult to obtain medical assistance due to the danger of contracting disease, Dr. William Harding, a brother of the Health Officer, and Dr. James Patrick Collins, went to the quarantine station to assist him. Both doctors were attacked by fever soon after they arrived on the scene, and Dr. Collins, (who was only 23) died on 2 July though Dr. Harding recovered.11 At this time, with only one doctor on the Island, the situation was critical. During the first two months of the passenger season, May and June, 27 vessels carrying a total of 4,893 passengers arrived. The number of deaths at sea or on board vessels at anchor amounted to 264, another 154 perished on the Island,12 and upwards of 500 lay sick in fever sheds and tents located there.13 During this period, however, the medical duties were almost entirely conducted by the Health Officer alone. Sometime in July, the peak period for emigration, relief came as Dr. William Mitchell volunteered his services.14 The two doctors faced a monumental task as 28 more vessels having on board 4,058 passengers arrived during that month. 186 were lost on route, or died on ship-board in quarantine, and another 112 died at the lazarettos.15

Early in August Dr. Mitchell was stricken with fever, and Dr. Harding, once again handled the medical duties single-handedly. On 5 August, the BRITISH MERCHANT put in from Cork with 338 passengers. There were 33 deaths on the voyage, about 50 were ill with fever on landing, and 56 subsequently died.16 The Emigration Officer at Saint John prophetically wrote: “This fresh supply of fever on a large scale, will press severely on Dr. Harding, who is now greatly exhausted.”17 A few days later, on 9 August, the Health Officer was prostrated with fever. No replacement was found until 13 August, when Dr. William S. Harding made his return to the Island having just recovered from an attack of fever. The latter Harding served as Health Officer for the balance of the passenger season. Dr. Wetmore acted as his assistant, until September, when his services were required at the Emigrant Hospital at the City and County Almshouse.18 Dr. George L. Murphy, it appears, was also engaged in medical duties at the quarantine station about this time.19 The doctors had more than enough to tax their energies as they had to attend to over 1,300 emigrants who were either sick on the Island, or were on board vessels waiting to be landed, and other vessels were expected at any moment. As a matter of fact, a total of 3,509 passengers arrived in seventeen vessels during that month, 136 emigrants died on

11 The Courier, 5 June and 3 July 1847. Dr. John Vondy, attending physician at Middle Island, Miramichi, died on the same day as Dr. Collins.
12 C.O. 188/101, 7 August 1847, encl. 7.
13 Ibid., 6 July 1847, encl. 1.
14 Ibid., 7 August 1847, encl. 10.
15 Ibid., encl. 8.
16 Ibid., encl. 10, and The Courier, 1847.
17 Ibid. encl. 10.
18 The Courier, 14 August 1847.
19 Third Report From The Select Committee Of The House Of Lords On Colonization From Ireland, 1848, Appendix X, P. and C. McGowan to Roger, 25 December 1847, pp. 125-126. P. McGowan landed at Partridge Island on 21 August 1847 on the YEOMAN and was placed under the care of a Dr. Murphy. [hereafter Third Report, Select Comm. Colon. From Ireland.]
route or on board vessels in quarantine, and large numbers were hospitalized on the Island ill with fever.\textsuperscript{20}

By the end of August, over 12,000 emigrants had landed at the quarantine station since the 1st of May, many of whom had succumbed to the rapidly spreading fever. At this time, the Lieutenant Governor appointed a Board of Physicians “to inquire into the state of the emigrants at Partridge Island, and at the Almshouse,” with a view of suggesting measures that might lead to improvements. The Board reported that the disease was contagious, as evidenced by illness among doctors and others who had been in contact with infected emigrants, and attributed its presence in the Saint John area to the following factors:

\ldots the co-operating influences of poverty and its concomitants upon the system of the emigrant prior to embarkation; to impurities of atmosphere in the crowded holds of vessels; to neglect of personal cleanliness; to impure water, and want of medical attendance and supervision during the passage; and lastly and principally, to exposure, impurities, want from insufficient attention, and hospital deficiencies at the quarantine station at Partridge Island, and to the deficient supply of wholesome water.\textsuperscript{21}

In those days, however, the medical profession had no knowledge of the source of the disease, or the manner in which it was transmitted.\textsuperscript{22} In contemporary sources, references to the physical effects of fever and dysentery are infrequent. Medical authorities pointed out that typhus, among other things, caused “a depression of the vital or organic nervous power, and its character, like that of most epidemic diseases, often assumes a frightfully aggravated form.”\textsuperscript{23} On the subject of relapsing fever, it was simply noted that some emigrants had spent up to sixteen weeks at the quarantine station undergoing several relapses of it.\textsuperscript{24} As for dysentery, there is an occasional reference to “bowel complaint” and “diarrohea” which are symptomatic of it. One emigrant, who probably was suffering from a severe form of it wrote: “I was given up by the doctor I passed blood trough (sic) me for Three days and the skin and flesh busted off My teeth and gave Blood on my mouth”.\textsuperscript{25} Many emigrants appeared to suffer chronic effects from fever and dysentery and were too “exhausted”, “debilitated”, or “emanciated” to work or to perform anything except light work. In fact, the rate of wages at Saint John advanced even though the city was crowded with new comers because of the lack of able-bodied labourers.\textsuperscript{26}

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\bibitem{20} C.O. 188/102, 27 October 1847, encl. 5 and \textit{The Courier}, 14 August 1847.
\bibitem{21} C.O. 188/101, 28 September 1847, encl. 3, Report of the Board of Physicians, St. John, 6 September 1847.
\bibitem{22} Two types of infectious fever were prevalent among the emigrants of that year namely: typhus fever and relapsing fever. Both are caused by micro-organisms entering the human blood stream, and are transmitted by lice which have swallowed human blood containing micro-organisms of the disease. In addition, a severe form of dysentery, probably bacillary dysentery, was wide-spread. It is an infectious disease, caused by a group of bacilli, conveyed in infected food or in excretement from human beings or flies. For an account of these, and other diseases present during the famine, see: C. Woodham-Smith, \textit{The Great Hunger}, (New York, 1962) pp. 188-205.
\bibitem{23} C.O. 188/101, 28 September 1847, encl. 4.
\bibitem{24} Ibid., encl. 3.
\bibitem{25} Third Report Select Comm. Colon. From Ireland, 1848, Appendin X, p. 126.
\bibitem{26} C.O. 188/102, 28 December 1847, encl. 1.
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difficult to convince employers that they ought to hire emigrants to work for them when there was a danger that they might themselves become infected.

Although it is important to note the kind of medical treatment given to sufferers of fever and dysentery, contemporary sources are also vague on this subject. With the limited number of doctors and assistants available during the crises, and the crowded condition of fever wards, there is no way in which individual medical attention would have been possible. For example, during the months of August through to mid-December, there was a monthly average of 540 patients in the Emigrant Hospital at the Almshouse under the care, it seems, of only one physician.\textsuperscript{27} Under these circumstances, the doctors could offer no more than a cursory medical examination of patients, and it was probably left up to nurses and attendants to carry out the prescribed medical treatment. Some of the medicines included: purgatives, such as castor-oil and laudanum, and stimulants, consisting chiefly of wine and brandy. Also recommended were "ablutions and frequent spongings of the body of the patient with tepid water either by itself or medicated with vinegar or the muriatic or nutric acids." Whether there was enough staff to carry this out to any degree is doubtful. Besides, the doctors suggested attention to diet, correct ventilation, frequent changes of body and bedclothes, removal of all offensive matter, and fumigation of fever wards, and other unclean places with chloride of lime.\textsuperscript{28}

Due to the lack of sufficient accommodations and medical staff, conditions judged by the medical authorities to be conducive to the spread of disease were very much in evidence on Partridge Island. For example, it became impossible to carry out the proper burial of the dead, not only due to the high mortality rate among the emigrants, but also because masters of vessels secretly interred their dead passengers at night. On more than one occasion bodies were buried in mass graves. For example, in August, when the Health Officer was ill, upwards of forty bodies accumulated and a huge pit was dug and the dead were buried together. A number of corpses were buried in ordinary clothing without the protection of coffins, and improperly covered with soil. As a result, patients in the fever hospital, adjacent to the burial ground, were exposed to an extremely cadaverous odour emanating from it. Also, an offensive smell arose from the night soil and garbage which piled up around the tents and fever sheds. Filth was not removed regularly due to the apparent disregard of emigrants for personal cleanliness, and the helplessness of their physical condition. Also, there was a lack of stewards to see that this was done.\textsuperscript{29} In order to prevent the disease from spreading to the city, constables were employed to oversee the movement of people between the Island and the mainland. In spite of this, a few emigrants, probably fearful of contagion, made their way to the city without permission.\textsuperscript{30}

Food was improperly distributed, as portions were often given out only to those who were able to go and receive it for themselves and their friends. Some, however, were unable to cook the rations offered to them, and others hoarded provisions, especially tea and sugar, in their sleeping quarters for future use.

\textsuperscript{27} The Courier, August to December 1847.
\textsuperscript{28} C.O. 188/101, 28 September 1847, encl. 3.
\textsuperscript{29} Ibid. and C.O. 188/102, 27 October 1847, encl. 7.
\textsuperscript{30} Morning News (Saint John) 2 June 1847 and The Courier, 5 June 1847.
Some ate half-cooked food, contaminated meat, and unripe fruit, a portion of it foisted upon them by hucksters from the city or consumed water that was unfit to drink. This was thought to be a leading cause of "the diarrhoeal and dysenteric affections which have been very fatal among children and adults." The two main sources from which the quarantine station drew its water supply were totally inadequate. The water in the well located near the burial ground was polluted, and the water furnished from a spring on the Island dried up during the hot summer weather. Additional supplies were sent from the city in casks, but water supplied in this manner was easily contaminated. Sometimes shortages occurred because rough seas or dense fog prevented its delivery.

Emigrants who contracted fever after arriving in Saint John were usually taken to the City and Country Almshouse which was located in the Parish of Simonds about one mile from the city. The authorities wanted to remove them from the centre of population to whom they presented a danger of contagion. The Almshouse, it appears, served both as a poorhouse, and a shelter for destitute and diseased emigrants for several weeks before hospitals and sheds were built exclusively for the use of emigrants. The exposure of parish and emigrant paupers, to those suffering from a malignant and contagious fever, had serious consequences for sick and healthy alike. During the period from March 1847 to March 1848, 2,381 emigrants, and 610 parish paupers were admitted into the almshouse establishment, including the emigrant hospitals and sheds. The death toll was appalling as 560 emigrants, and 126 paupers died during that fateful year. In 1856, the chairman of the Board of Health, Dr. William Bayard, who had been a physician at the Almshouse during the crises of 1847 recalled:

The Almshouse soon became a plague spot, the rooms were crowded to excess... local and personal impurity soon generated a pestilential atmosphere, and the records of the Almshouse will furnish frightful evidence of its mortality among the doomed inmates of the misnamed Hospital.

Late in August 1847, when fever sheds and hospitals were completed near the almshouse to accommodate sick emigrants, conditions in it improved considerably. The Emigrant Hospital, as it was called, really consisted of several buildings. There was one structure which could accommodate 110 patients, another which could accommodate 128, and an undetermined number of narrow sheds similar to those on Partridge Island. Generally, there was a lack of space between patients, passageways were blocked, and there was no covering on the outer walls of some of the buildings. Consequently, patients suffered from exposure during damp and windy weather. Nonetheless, by late August there appeared to be ample room for all those who sought refuge there.

31 C.O. 188/101, 28 September 1847, encl. 3.
32 Ibid.
33 Provincial Archives of New Brunswick, Fredericton, Minutes, Quarter Sessions, Saint John County, BK.1, p. 516, 6 June 1848. [hereafter PANB] These statistics differ slightly from those of H.M. Emigration Officer, Saint John, which indicate that 595 emigrants died at the Emigrant Hospital during the calendar year 1847.
35 C.O. 188/101, 28 September 1847, encl. 3.
Heretofore, much inconvenience arose from the crowded condition of the wards; but the buildings which have been recently erected afford accommodation at present... 1,148 patients labouring under fever and dysentery have been admitted into the emigrant hospitals at the almshouse establishment since 1st May, of whom 377 have been discharged cured, 213 have died, and 558 are still remaining in hospital, under the care of only one physician... 36

Dr. William Bayard served, except for a brief period, as attending physician at the Emigrant Hospital from 1 May to 30 July, when he contracted fever. Dr. Robert Bayard performed the medical duties for about two weeks, in late June and early July, during the absence of the former Bayard. There was no doctor there from 29 July to 12 August. During that time the patients were under the temporary care of William Craig, the superintendent of the emigrant establishment. Then, Dr. John Paddock was hired as visiting physician on 12 August, but after only one month of service he too was attacked by fever. Dr. Wetmore, who had been a medical assistant on Partridge Island, replaced him. 37 Wetmore served as physician for an undetermined period of time, but he also was prostrated by fever. 38 It is not certain what medical arrangements were made for the emigrants after that time.

In the city, destitute emigrants were crowded into hastily erected sheds located at the east end of St. James Street. They provided temporary accommodation for about 200 emigrants who, before their erection, were lying at night in the streets. They were situated about 200 feet from the Provincial Marine Hospital, and 1,200 to 1,500 feet from the military barracks. Captain J.D. Johnstone wanted them removed because he believed the emigrants living there presented a grave danger to the health of the soldiers under his command, and to the residents of the Lover Cove area of the city. Although there was constant movement of emigrants in and out of these buildings the danger of contagion, although ever present, was greatly reduced because as soon as fever developed the sick were immediately removed to the Emigrant Hospital outside the city. 39 Early in December, the sheds were closed and 182 pauper emigrants remaining there were sent to the City and County Almshouse. 40

The former City Poorhouse, located on the corner of Carmarthen and King Street east, did not serve as a fever hospital during the epidemic despite the fact that a committee, appointed by the Quarter Sessions, had recommended that it be restored for that purpose. 41 Probably, its proximity to the centre of the city prevented it from being used as an infirmary. At first destitute emigrants from the AEOLUS, which had arrived on the 31 May from Sligo with some 500 passengers, found refuge there. They were former tenants from the Lissadell estate of Sir Robert Gore Booth and had been sent out at his expense. Although they arrived in seemingly good health, many suffered from sickness after coming up to the city. "The old poor's-house is a factory of disease, in consequence of the

36 Ibid.
37 Ibid; C.O. 188/101, 13 July 1847, encl. 3; and The Courier, 11 September 1847.
39 C.O. 188/101, 28 September 1847, encl. 8.
40 The Courier, 4 December 1847.
41 PANB, Minutes, Quarter Sessions, Saint John County, Bk.1, p. 238, 5 January 1847.
filth and destitution of its inmates, many of whom are penniless widows and orphans. Authorities acted quickly in order to prevent the spread of disease among the inmates. A few days later, a doctor inspected the premises and ordered the removal of the sick to the Emigrant Hospital. Late in August about 150 pauper emigrants still remained in the poorhouse, and it was believed that many of them would become a public charge on the taxpayers of the community. About two months later these emigrants were cleared out of the building and the Provincial Government, generously assisted by private charities, converted it into an orphan asylum.

In the autumn of 1847 there were over 150 children in the Emigrant Hospital at the Saint John City and County Almshouse most of whom were either orphans, half orphans, or children whose parents were suffering from disease. Others were in sheds on St. James Street and Partridge Island, or scattered in various parts of the city, where some lived chiefly by begging. A shelter was needed in order to remove them from exposure to disease and provide them with proper care. The intention was to build up their physique in order to induce residents of the urban and rural area to adopt them. A staff, which included Dr. John Paddock as medical attendant, was hired. Late in October the first of the orphans, 74 in number, were transferred from the Emigrant Hospital into the new asylum. By the end of the year nearly 200 children, some of whom were extremely debilitated and subsequently died, had been admitted into it.

As the year advanced, emigrants continued to arrive, but with less frequency and generally in better health then in the earlier part of the season. For example, in September, nine vessels reached port with a total of 1,380 passengers, 60 of whom died before arrival or on board vessels in quarantine. In the months of October and November together, another nine vessels carrying 1,052 landed, and only eleven deaths occurred on the ship-board at sea or in quarantine. On 1 November, the very day the quarantine station was closed for the year, the AEOULUS, having on board 428 of Lord Palmerston's tenants, and the TRIUMPH, with 46 from Mr. Ffolliott's estate, come in from Sligo. The passengers on the TRIUMPH arrived in good condition, but the destitution and suffering of those on the AEOULUS was deplorable. The Health Officer candidly remarked:

"There are many superannuated people, and others of broken-down constitutions, and subjects of chronic disease, lame, widows with very helpless families, feeble men (through chronic disease, etc.) with large helpless families;... and that nearly 400 so glaring paupers are thus sent out. Who so tame as would not feel indignant at the outrage?"
By this time, public buildings were so overcrowded with sick and destitute that it was difficult to find accommodation for them. Outraged municipal authorities, fearful of large financial burdens to provide for their support, tried to induce them to return to Ireland by offering to pay their way. Not willing to take up the offer, there was no alternative but to crowd them into the emigrant establishment at the Almshouse. Room was provided for many of the children, however, in the Emigrant Orphan Asylum.

The annual report of Moses Perley, the Emigration Officer at Saint John, reveals that a total of 17,074 emigrants embarked for New Brunswick in ninety-nine vessels from Irish ports, and seven from Liverpool, but the passengers were "very nearly, without exception, all from Ireland..." Altogether over 2,100 died: 823 deaths occurred on the passage, and 1,292 died after arrival, the majority in Saint John where 14,892 emigrants landed. The mortality at the quarantine station on Partridge Island was 601, and another 595 died at the Emigrant Hospital at the City and County Almshouse. Few died elsewhere in the province, except at Middle Island in the Miramichi River where 96 deaths were recorded, all passengers from the Looshtauk. In the City of Saint John, the mortality in the former poorhouse, and in fever sheds in the south end was minimal, because these institutions did not receive fever patients, and if infection took place after admittance, the sick were immediately removed to the Emigrant Hospital at the Almshouse. The number of deaths, beyond the official total, will never be known, because there were undoubtedly several who died of whom there is no record. In Perley's opinion, 2,400 died or one-seventh of those who set sail for the colony. This figure, of course, does not include seamen or residents of the province who died as a result of the epidemic. The lack of information on this subject would lead one to believe that the total was negligible.

No accurate account exists, either, of the number of emigrants who proceeded to the United States after their arrival in New Brunswick. Perley estimated that nearly fifty percent re-emigrated, "notwithstanding the exertions used to prevent their entrance there." Many wanted to go there directly, but chose instead a British colony because the passage rate from Great Britain was cheaper and the entrance requirements were less severe. Usually the able-bodied, consisting chiefly of heads of families, went immediately, or after a short period of time in the province, leaving their dependents to the temporary or permanent care of overseers of the poor or Almshouse commissioners. The Passenger Act in the United States restricted the landing of the sick and destitute, and some who ventured forth were sent back to British territory. Others, probably, left the colony, as they had their homeland, in order to escape from the disease which was carrying off so many of their friends and relatives. For example, the Henigans, who had been sent out from the estate of Sir Robert Gore Booth, explained: "we

53 Ibid.
54 Ibid., 14 December 1847.
55 These statistics are taken from the quarterly returns of H.M. Emigration Officer, Saint John, found in the following: 6.0.188/101, 7 August 1847, encl. 7; 6.0.188/102, 27 October 1847, Encls; and 6.0.188/102, 28 December 1847, encl. 3.
56 C.O. 188/102, 28 December 1847, encl. 1.
57 Ibid., 27 October 1847, encls. 4 and 5.
left miserable St Johns it is almost as bad as Ireland we are getting on very well since we came to the State of Maine. . . ."^^{58}

In spite of reports of famine and disease in Ireland and indications that the immigration of destitute and unhealthy would be more extensive than in previous years, no special measures were taken to prepare for the influx. Repairs were not made to existing quarantine buildings until vessels from Ireland actually began to arrive, and it was soon discovered that additional fever sheds were needed to accommodate the large numbers of sick. Before these were built, tents were used, but it was impossible to provide shelter for all who needed it. A similar lack of accommodations was noticeable once emigrants reached the mainland. Emigrants, who contracted disease after arriving in the city, were simply placed in the City and County Almshouse along with parish paupers, who often became infected from exposure to them. It was several weeks before fever hospitals were completed, near the Almshouse establishment, exclusively for the use of emigrants. Hasty preparations were also made to deal with the large number of pauper emigrants. The old city poorhouse was fitted up to house destitute tenants from the Booth estate, and sheds were rapidly built, in the Lower Gore area, for other indigents who had been lying about in the streets without shelter of any kind.

At the quarantine station, and the City and County Almshouse, little could be done, under the circumstances, to prevent the spread of the epidemic. The Board of Physicians, which conducted a study of conditions at Partridge Island and the Almshouse, suggested the erection of additional buildings at the quarantine station, and other improvements including a proper burial ground, a wholesome supply of water, and adequate medical staff.^^{59} But their recommendations came too late in the season to be of any benefit for that year. Throughout the spring and summer the epidemic raged out of control, but with the arrival of autumn, and the coming of colder weather, it gradually subsided. By then the number of emigrants who could become infected had diminished. But the crises was far from over, because public buildings were still crowded with the sick and destitute.

In the aftermath of the disaster, the colonists rightfully laid some of the blame on Irish landlords, such as Booth and Palmerston, who together sent nearly 2,000 of their poorer tenants to New Brunswick in order to relieve their estates of the financial burden of providing for them.^^{60} The colonies needed a supply of sturdy labourers and farmers, who would become permanent settlers, not emigrants bearing contagion, or paupers who would become a public charge. The British government did not intervene with the activities of landlords, or potential emigrants because it followed the principle that emigration to America ought to be voluntary. It was up to the individual to decide whether or not he should leave his homeland. The government was responsible, however for enforcement of the Passenger Act, which controlled and regulated the transport of passengers from

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59 C.O. 188/101, 28 September 1847, encl. 3.
60 References to tenants from the estates of Booth and Palmerston are contained in the following: 6.0.188/101, 7 August 1847, encl. 7; 6.0.188/101, 27 August 1847, and encls; 6.0.188/101, 28 September 1847, encls. 1 and 9; and 6.0.188/102, 11 November 1847, encl. 1.
Celtic Cross, Partridge Island, dedicated 10 October 1927: “This monument was erected in memory of more than 2,000 Irish immigrants, who died of typhus fever, contracted on shipboard during the voyage from Ireland, in the famine year 1847, and of whom 600 were buried on this Island. This Cross also commemorates the devotion and sacrifice of Dr. Patrick Collins, who, after ministering to the victims of the disease, himself contracted it and died.” (Public Archives of Canada C-35127)
Great Britain. The Act was not followed strictly enough to offer emigrants the intended protection, because with the large number going out, there was not enough staff to enforce it properly. Complaints were frequent about unsanitary and overcrowded conditions on board unsound emigrant vessels but, surprisingly only five convictions were made at Saint John for violations of the Passenger Act. More importantly, hasty medical inspections of emigrants at points of departure resulted in the infected often going on board undetected and others gradually becoming contaminated from exposure to them.

Upon arrival in Saint John, several of the ablebodied or those who possessed enough money went to the United States leaving the destitute and sickly behind as a burden on the Emigrant Fund, from which the deserving were maintained for a period of up to one year. In 1847, the total expenditure (beyond the proceeds in the fund) amounted to £14,820. The taxpayers of Saint John, however, feared a substantial increase in their poor rates from the large number who, undoubtedly, would become a permanent charge once they were no longer eligible for relief from this source. Prodded by local authorities, the provincial government appealed to London for assistance, and after a series of sharp exchanges, the British government accepted part of the burden. They agreed to pay £7,410 which was exactly one-half the amount of the deficit.

As for officials in Saint John City and County, it can be said that they showed a certain lack of foresight in not anticipating the size of the immigration or the wretched condition of the emigrants. Since they did not make any advance preparations, they were forced to employ stop-gap measures in order to deal with the crises. But, when one considers the influx of some 15,000, mainly destitute and diseased emigrants, into an area with a population of slightly over 30,000, it is no wonder that they were overwhelmed by the problems it created.

61 C.O. 188/102, 28 December 1847, encl. 1.
62 C.O. 188/105, Head to Arey, 19 June 1848, and encls.
63 C.O. 189/18, Arey to Head, 1 November 1848.

Résumé

Les conditions (maladies et malpropreté) dans lesquelles vivaient les immigrants irlandais lors de leur installation à St-Jean, Nouveau-Brunswick en 1847, sont étudiées. Les registres du British Colonial Office et les coupures de presse d’un journal local ont été consultés pour décrire les dispositions prises par les autorités et les médecins pour résoudre les problèmes encourus par l’arrivée massive de ces gens d’outre-atlantique.