

Journal of the Canadian Historical Association Revue de la Société historique du Canada

Journal of the
Canadian Historical Association
Revue de la
Société historique du Canada

“The Public Has The Right to be Protected From A Deadly Scourge”: Debating Quarantine, Migration and Liberal Governance during the 1847 Typhus Outbreak in Montreal

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Volume 23, numéro 1, 2012

URI : <https://id.erudit.org/iderudit/1015728ar>
DOI : <https://doi.org/10.7202/1015728ar>

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Éditeur(s)

The Canadian Historical Association / La Société historique du Canada

ISSN

0847-4478 (imprimé)
1712-6274 (numérique)

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Citer cet article

Horner, D. (2012). “The Public Has The Right to be Protected From A Deadly Scourge”: Debating Quarantine, Migration and Liberal Governance during the 1847 Typhus Outbreak in Montreal. *Journal of the Canadian Historical Association / Revue de la Société historique du Canada*, 23(1), 65–100.
<https://doi.org/10.7202/1015728ar>

Résumé de l'article

Au cours de l'été de 1847, les conséquences de la famine, de la maladie et des bouleversements sociaux en Irlande se sont fait sentir jusque dans les ports de l'Amérique du Nord. Plaque tournante commerciale et migratoire, Montréal a été grandement affecté par ces événements. L'arrivée de milliers d'immigrants irlandais, plusieurs ayant contracté le typhus durant la traversée transatlantique, ont provoqué un débat controversé dans la ville. Le public inquiet a donné son appui à une proposition mise de l'avant par des représentants de l'administration municipale pour la construction d'une station de quarantaine en amont de la ville sur le fleuve St-Laurent où les immigrants devaient être confinés jusqu'à ce que leur bonne santé soit confirmée au-delà de tout doute raisonnable. Cette mesure devait ramener l'ordre non seulement à Montréal, mais également dans le processus d'immigration. Une instance nommée par le gouvernement colonial a toutefois rejeté la proposition et suggéré une solution plus modeste d'après laquelle les immigrants continueraient à être hébergés dans des abris situés à un jet de pierre des banlieues ouest de la ville. Le débat très animé qui s'ensuivit éclaira la manière dont l'élite politique de la ville et le public plus généralement concevaient les questions de migration, de santé publique et de gouvernance libérale. Cet article vise à étudier le rôle joué par cette crise dans l'évolution de la culture politique municipale et à replacer les événements de 1847 dans le contexte d'une lutte plus générale entre les autorités locales et métropolitaines.

“The Public Has The Right to be Protected From A Deadly Scourge”: Debating Quarantine, Migration and Liberal Governance during the 1847 Typhus Outbreak in Montreal¹

DAN HORNER

Abstract

During the summer of 1847 the impact of famine, disease, and social upheaval in Ireland was felt in port cities across the North Atlantic World. As an important hub of commerce and migration, Montreal was deeply affected by these events. The arrival of thousands of Irish migrants, many of whom had contracted typhus during their journey, touched off a contentious debate in the city. An engaged and alarmed public threw their support behind a proposal put forward by representatives of the municipal government that called for the construction of an elaborate quarantine facility just down the St. Lawrence River from the city. This facility, which migrants would be confined at until their healthy status was confirmed beyond reasonable doubt, promised to return order not only to Montreal, but to the entire migration process. The body appointed by the colonial administration, however, rejected the proposal, and tabled a far more modest plan that would continue to house migrants in sheds located just a stone's throw away from the city's western suburbs. The highly charged debate that ensued furnishes us with an opportunity to examine how the city's political elite and the broader public were thinking through questions about migration, public health, and the contours of liberal governance. The objective of this article is to consider the role that moments of crisis such as this played in shaping the city's political culture, and to place the events of 1847 in the context of the larger struggle between local and metropolitan authority occurring during this period.

Résumé

Au cours de l'été de 1847, les conséquences de la famine, de la maladie et des bouleversements sociaux en Irlande se sont fait sentir jusque dans les ports de l'Amérique du Nord. Plaque tournante commerciale et migratoire, Montréal a été grandement affecté par ces événements. L'arrivée de milliers

d'immigrants irlandais, plusieurs ayant contracté le typhus durant la traversée transatlantique, ont provoqué un débat controversé dans la ville. Le public inquiet a donné son appui à une proposition mise de l'avant par des représentants de l'administration municipale pour la construction d'une station de quarantaine en amont de la ville sur le fleuve St-Laurent où les immigrants devaient être confinés jusqu'à ce que leur bonne santé soit confirmée au-delà de tout doute raisonnable. Cette mesure devait ramener l'ordre non seulement à Montréal, mais également dans le processus d'immigration. Une instance nommée par le gouvernement colonial a toutefois rejeté la proposition et suggéré une solution plus modeste d'après laquelle les immigrants continueraient à être hébergés dans des abris situés à un jet de pierre des banlieues ouest de la ville. Le débat très animé qui s'ensuivit éclaire la manière dont l'élite politique de la ville et le public plus généralement concevaient les questions de migration, de santé publique et de gouvernance libérale. Cet article vise à étudier le rôle joué par cette crise dans l'évolution de la culture politique municipale et à replacer les événements de 1847 dans le contexte d'une lutte plus générale entre les autorités locales et métropolitaines.

In 1847 an epidemic outbreak of typhus gripped Montreal from the outset of the shipping season to the end of the summer. By the end of 1847, 6,000 had succumbed to the fever and over 11,000 men, women and children had been hospitalized — some at the General Hospital, but most at the emigrant sheds that had been erected along the banks of the Lachine Canal on the city's southwestern periphery.² The impact of the disease was experienced most intensely by the emigrants who were in the midst of fleeing the famine in Ireland. Typhus, which struck victims down with high fevers, rashes, and delirium, flourished on board the cramped and filthy ships that emigrants boarded to make the transatlantic voyage. Spread by lice, the disease preyed on those who had been weakened by hunger and dislocation, and who circumstances had forced to reside in unhygienic conditions, thus leading observers to refer to the illness colloquially as “camp fever,” “jail fever,” or “ship fever.”³ Montreal was not alone in its confrontation with typhus in 1847 — the disease spread along the pathways being created by the out-migration of the Irish from their homeland, a phenomena that was linked to crop failure, the transformation of social relations and agricultural practices brought on by the region's transition to a market economy and the unwillingness

of metropolitan officials in London to interfere with how landlords managed their private property. It was this governmental inaction that has led historians of the famine to frame it as a crisis in liberal governance, an approach that this article attempts to build upon by examining the impact that the famine and the ensuing migration had on Montreal.⁴

The events of 1847 reinforced existing connections and similarities between Montreal and other port cities in North America, Britain, and Western Europe. While the epidemic did not spread deeply into the general population, it thrust what was then British North America's largest city and commercial hub into a profound crisis. Civic élites were forced to contemplate how their city would flourish in an age marked by mass migration and the emergence of an urban poor composed disproportionately of recent migrants to the area. In the midst of the epidemic, with a public demanding decisive action and tensions building between the municipal and colonial administrations, heated debates occurred over the role of the state, the validity of public opinion, and the rights of destitute emigrants. The typhus epidemic of 1847 must therefore be read not only as a crucial turning point in the history of public health in Montreal, but also as an opportunity to consider how the public was thinking through a variety of issues related to urban colonial governance during a turbulent and transformative decade in the city's history.

This article focuses on one of the most divisive debates that emerged in the city during the epidemic. The issue at stake was the quarantine policy adopted by the colonial administration, which involved inspecting incoming emigrants at Grosse Île, just down the river from Quebec City, before allowing them to proceed up the St. Lawrence River to Montreal, where those who were subsequently found to still be displaying symptoms of typhus were once again confined to sheds built along the banks of the Lachine Canal. As the epidemic worsened, a group of civic élites in Montreal became increasingly vocal critics of a policy they lambasted as insufficient. What was at stake here, they thundered, were the lives of Montreal's citizens, who had been offered little in the way of protection from the coming crisis. They insisted that the only prudent course of action was to build another facility down the river from Montreal, where emigrants would be compelled to pass through a second layer of examination and quarantine before being permitted to migrate further up the river. The debate that ensued between

proponents of these two plans provide us with a glimpse into how urban élites and the broader public were thinking through the challenges their community faced as a hub of transnational migration. It demonstrates how the contours of mid-nineteenth century liberal governance were being negotiated in an atmosphere of crisis, as commentators, administrators, and politicians weighed in on how to best balance the rights of emigrants to circulate freely — with the needs and wishes of the general public that wanted to be protected from the social disorder that they associated with mass migration. This debate shows how, in a decade marked by fierce political and sectarian conflict, élites engaged in the project of governing Montreal used the debates surrounding the typhus epidemic to bolster assertions that they were legitimate wielders of power and authority. Finally, it demonstrates how events occurring on the ground in Montreal were pulled into the larger orbit of the struggle between local, colonial, and metropolitan officials for jurisdictional authority.

This reading of Montreal's 1847 typhus epidemic is an attempt to place the events and the debates that took place that year in two vibrant bodies of literature. The first is a literature that has emerged in recent years that explores the transformation of British North America's political culture in the mid-nineteenth century. An increasingly engaged local public⁵ was demanding a more effective voice in government affairs, lashing out at the small clique of anti-democratic colonial officials who had enjoyed the benefits of nearly unfettered access to the levers of political power since the earliest days of the colonial project. The political order that emerged out of the ensuing conflicts might have paid lip service to the democratic ideals that were circulating the North Atlantic world during this period, but was itself based on a dynamic process of exclusion.⁶ In their efforts to wrest control over colonial affairs away from unelected representatives of the metropole, local élites continuously put forward the argument that their newfound authority was legitimate because they possessed a knot of character traits that made them suitable for the position.⁷ These highly contested and politicized traits were rooted in gender, race, and class. In this discourse, only elite white men were deemed capable of possessing and refining the restrained and independent character needed to govern a tumultuous colonial outpost.

It was not only the composition of the political élite that changed during this period, but their approach to governance and authority.

While this process of transformation was gradual, uneven and contested, there was a growing tendency amongst those with access to political authority to define, identify, and attempt to manage a myriad of social problems linked to rapid urbanization, such as crime, disease, and poverty. Social relations during this period were marked by the establishment of numerous institutions devoted to this broader project, including but not limited to schools, prisons, hospitals, and orphanages, many of which were founded and governed by religious bodies.⁸ It was the liberal rhetoric of the day that provided the ideological foundation for this project. This rhetoric was shaped by an effort to balance rights with a vision of an orderly society that privileged a property holding élite in the face of popular unrest and social upheaval. This vision caused them to be wary of excessive government intervention in areas that encroached upon what were seen as part of the domain of private initiatives — like migration and public health. Rather than targeting social problems with a sweeping and authoritarian approach, liberal theorists maintained that élites could establish and foster an orderly society by reforming the disorderly traits of consenting individuals, and that this could be carried out without encroaching too deeply on their rights and liberties.⁹ In both major and minor ways, the theories and practices of authority that flowed out of these ideas was changing the relationship between people and the state.¹⁰ How government officials and the broader public responded to an outbreak of epidemic disease became a crucial test of how a society went about putting these ideas into practice.

The second body of literature engaged with here is that which explores the connections between epidemic disease, social conflict, and the emergence of the state. For decades, historians have studied the tendency that epidemics have to spark and deepen conflicts between different racial, ethnic, or class communities.¹¹ Further fuel is added to these conflicts because epidemics frequently prompt the state to intervene more forcefully in people's lives, and often in ways that further empowered already dominant social groups. This was especially true given that scientific debates were still dominated by the miasmatic theory of disease transmission, which led officials and the public to place much of the blame and suspicion for epidemic outbreaks on the community's poorest members, who had no choice but to live in cramped and unhygienic dwellings. Examining how a city with numerous ethnic, class, and sectarian cleavages

experienced and addressed the social, political and cultural disorder of an epidemic outbreak can allow us to deepen our understanding of how the complex politics surrounding public health played out in a local context.

The typhus epidemic struck Montreal just as a cluster of interconnected social, cultural, and economic transitions were already fuelling an atmosphere of instability, uncertainty and conflict. The city had long been the commercial hub of British North America, but the consequences of changing economic patterns in the global economy were beginning to be felt by labourers and merchants, as the scale of global commerce was growing on the eve of industrialization.¹² Social relations were increasingly marked by the strains of economic polarization. While the rich were growing wealthier through commerce and investment in property and transportation infrastructure, the ranks of the urban poor were rapidly growing. The majority of the migrants arriving in Montreal were being pushed into work that was precarious, dangerous, and which paid such low wages that surviving in this environment required tremendous thrift and careful strategizing.¹³ For Montreal's poorest residents, opportunities were narrowing. The ambition to establish themselves as independent farmers that had motivated many Irish migrants to embark on the harrowing transatlantic journey, was quickly slipping from their grasp as British North America's agricultural frontier began to close.

The massive wave of migration into the city made a significant impact on its demographic composition. Not only was the population growing, from under 40,000 in the 1830s to nearly 50,000 by 1847, but the linguistic balance of the city was shifting, as this growth was being driven by a significant influx of migrants from Ireland and the British Isles that made this a rare moment when French speakers were a minority in the city, a shift that helped fuel the decade's ethnic conflicts.¹⁴ These economic and demographic shifts were being played out against the backdrop of a political crisis that had been simmering in the colony since the first decades of the century that, amongst other things, centred on the demands of the French Canadian élite for more effective political representation. They demanded an end to the political arrangement in place since the British conquest of New France in 1763, which allowed a small British Protestant minority to maintain a tight grip on the levers of political power.¹⁵ These political tensions, which frequently took on an ethnic hue, spilled over into collective violence on a number of occasions, most

notably with armed rebellions in 1837 and 1838, and with scattered but regular confrontations on the streets of Montreal throughout the 1840s.¹⁶

Other cultural and political transitions were also making an impact during this period, and would leave an indelible mark on the city's reaction to the typhus epidemic. After playing a more modest role in previous decades, the Catholic Church was beginning to assert itself as a major social, cultural, and political force during this period.¹⁷ The typhus epidemic, when the tasks of providing the bulk of the medical care and overseeing much of the charitable work was handed off to the church, played a crucial role in this shift.¹⁸ The startling pace of growth was also inspiring a group of elites, drawn from across the ethnic, linguistic, and sectarian divide, to become increasingly engaged in the project of reforming the urban environment. Their activism touched on everything from demanding that the sale of alcohol be more carefully regulated to demanding a greater police presence on the city's streets and public spaces. The epidemic provided this group of engaged bourgeois Montrealers with vital ammunition. They maintained that the prevalence of disease in Montreal was linked to the cluster of social and environmental ills that they were already committed to fighting against.¹⁹

Disease played a pivotal role in the social, political, and cultural transformations that gripped Montreal in the middle decades of the nineteenth century. Epidemics were the product of the sharp spike in human migration that occurred during the 1840s. With private actors involved in the migration process looking to maximize their profits and a government unwilling to impose regulations, migrants were often shepherded through a series of spaces — ships, workhouses, quarantine stations, and cramped dwellings — that offered ideal conditions for the spread of disease. Not only did epidemic outbreaks reflect the rapid urbanization that was occurring across the North Atlantic world during this period, they had an indelible impact on that process. Disease pushed the residents of communities like Montreal to ask questions about how their cities worked as hubs of regional and transatlantic migration. The huge increase in the scale of migration that was occurring in the middle of the 1840s demonstrates just how closely integrated Montreal was into a network of transatlantic spaces — some urban and some rural — that were being transformed by the strategies of capitalist development.²⁰ More broadly speaking, the debates prompted by such discussions in

turn raised questions about who was to be included and excluded from the rights associated with citizenship. To what degree did the authorities in these cities, be they civic or religious, bear responsibility for the well-being of the thousands of migrants arriving in their ports during this period? The arrival of unprecedented numbers of Irish migrants in the 1840s, and the public health crisis that accompanied their arrival, revealed that the mechanisms that existed in British North America for dealing with questions relating to migration, poverty, and disease were no longer sufficient. This was not a theoretical discussion of principles: The cost of providing care for Irish migrants stricken with the disease placed a massive burden on the resources that the city had for supporting the needy. This was a city that, because it functioned as a commercial and economic hub, was already struggling to provide meagre assistance to the destitute men, women, and children who resided there. Many argued that the community's first priority ought to be caring for the poor who already lived in Montreal, not the Irish migrants passing through the city.²¹ Therefore, as political leaders and the broader public in the city debated how to address the challenge of providing care for disease-stricken migrants, they were also thinking through the limits of their legal and moral obligations towards them.

The typhus epidemic brought the entire project of state intervention into question in a sustained way for the first time since the cholera epidemic that struck the city in 1832. The three levels of government that had a stake in the city — local, colonial, and imperial — adhered in different ways to a liberal political ideology that viewed prolonged acts of state intervention warily. While temporary public health measures had been adopted during the 1832 epidemic, they had not been maintained in intervening years, and there was little regulation of migration into the colony during this period.²² This hesitancy was especially problematic in the midst of an epidemic, a challenge to public order that seemingly demanded intervention on a grand scale, in the form not only of placing greater restrictions on migration into the colony, but also in enforcing strict sanitary regulations, which was clearly a governmental leap into the realm of private property. The typhus epidemic of 1847 therefore must be read as a crisis that prompted the authorities and the public to confront long-standing practices and challenge firmly entrenched ideological beliefs.

The first news that the city was at risk of being exposed to an epidemic began to appear in the Montreal newspapers in the winter of 1847, as word began to spread outwards from the British press that the situation in Ireland had become especially dire.²³ Reports began to emerge that suggested that the famine conditions continued to plague Ireland, as had been the case since 1845, and that in the ensuing rush to flee the country reported cases of typhus were becoming common.²⁴ Tenant farmers had become increasingly dependent on the potato, as it was the only crop that could sustain a family on their subdivided plots of land. Absentee landlords, meanwhile, were determined to wring as much profit as they could from their holdings, further souring social relations and deepening the vulnerability of Ireland's rural poor.²⁵ When blight caused the potato crop to fail nearly one million perished in the country, and roughly one million more fled in search of a better life elsewhere.²⁶ Typhus and a handful of other diseases thrived amidst the dire conditions that accompanied this massive displacement of people.

Depending on an array of material, circumstances, and family strategies, this out-migration of Irish peasants could follow a variety of paths. Many migrated first to port cities along the west coast of England and Scotland — with Glasgow, Liverpool, and Bristol being especially popular destinations for Irish migrants. While some established themselves permanently in these teeming British cities, others plotted a longer migratory route, if their financial resources permitted. For many Irish migrants, the promise that North America offered was access to land. While some traveled directly from Irish ports to North America, most landed first in Britain — most notably Liverpool — where they made arrangements to travel onwards to North America.²⁷

As rumors circulated that the wave of migration from Ireland would be as large if not larger than that of the previous summer's, officials in a number of American jurisdictions, following the lead of the State of New York, aimed to staunch the flow of migrants landing on their shores by imposing burdensome taxes and restrictions on emigration.²⁸ With these penalties in place in time for the shipping season of 1847, the vast majority of the Irish migrants with the resources necessary to set out for the North American continent were left with little choice but to migrate to British North America. While a minority chose to land in New Brunswick in search of work in the booming timber industry there,²⁹

most prepared to board ships that would deposit them at Grosse Île, the quarantine station erected by the colonial authorities just down the river from Quebec City. In theory, after passing medical inspection there, the emigrants would crowd onto steamboats to travel further up the St. Lawrence River, deeper into the North American continent.

When word began to filter through colonial and imperial channels that the 1847 migration would be especially large, the administration projected a sense of confidence that they could keep a handle on the situation. Extra personnel were hired at Grosse Île, and the existing hospital infrastructure was reinforced. Once the St. Lawrence River thawed and ships began arriving in the spring, though, it was not long before the massive scale of the migration quickly overwhelmed even these upgraded facilities. Ships backed up in the Gulf of St. Lawrence, raising the ire of the colony's business community, whose tepid support for the practice of quarantine was predicated on it being as quick and non-intrusive as possible. Medical officials had to quickly abandon their plans to carry out thorough medical inspections of the migrants, and it was later revealed that these inspections became rushed, thus opening up the possibility for oversights.³⁰

It quickly became obvious to the residents of Montreal, both from reading local papers and from witnessing the events that were transpiring on their city's waterfront, that the daunting scale of the 1847 migration demanded a re-thinking of the emigration policy and the infrastructure that existed to carry it out. The catalyst for this was the collective realization that the quarantine station at Grosse Île was not doing enough to separate the healthy from the sick. Some men, women and children who had contracted the disease on the Atlantic passage were being waved through by medical officials at Grosse Île because they were not yet outwardly demonstrating the symptoms of the disease, or were successful in concealing these symptoms. Others who were declared healthy at Grosse Île contracted typhus after being jammed back onto the steamboats that carried them up the St. Lawrence River to Montreal. Thus, the colonial government's assurance to the public at the outset of the shipping season that the facilities and personnel already in place down the river from Quebec City would be capable of serving as a *cordon sanitaire* fell quickly into disrepute.

As the potential severity of the typhus epidemic became increasingly evident, the municipal government passed Bylaw 186, which created a

Board of Health charged with coordinating the city's efforts against typhus.³¹ The body was given sweeping powers that would allow them to reverse any decision made by competing institutions, including City Council and Trinity House, the body that governed the harbour. They would oversee any future construction of public health infrastructure, most notably a new hospital that would be for the exclusive use of migrants and located near the city limits. The Board of Health was also given the go-ahead to police the sanitary condition of people's private property, thus providing them the authority to order citizens to immediately cleanse residences and empty lots that they owned. Any individual convicted of ignoring the authority of the board or otherwise interfering with their efforts was threatened with steep fines and a possible prison sentence.³²

The considerable powers given over to the hastily convened Board of Health by City Council is interesting on a number of fronts. First, it demonstrates that after months of trying to gauge whether or not the threat of typhus was to be taken seriously, Montreal's civic élites were now prepared to react vigorously to the situation. Second, it demonstrates that these same civic élites were conscious that the dense nest of overlapping jurisdictions in the area of emigration and public health posed a severe threat to their efforts to protect the city from a typhus outbreak. The imperial government, the colonial authorities, the city council, Trinity House, and private citizens all had a stake in implementing the reforms that they felt were needed to effectively carry out a campaign against the epidemic.

While the city council handed over their jurisdiction on this matter with apparent enthusiasm, the Board of Health had to take an aggressive stance when it came to other levels of government. In their first report, published in the *Gazette* a few weeks after it was founded, the Board of Health forcefully declared that although the colonial government had bankrolled and overseen the construction of the sheds that were housing the Irish emigrants on the banks of the Lachine Canal, they were located within the city limits and were thus under civic jurisdiction. Therefore, any future decision that might be reached by the board regarding the location or utilization of the sheds would have to be made exclusively by the Board of Health. They ended this section of their preliminary report by extending a meagre olive branch to the colonial officials involved in the operation of the emigrant sheds and with the administration of emigration in general by noting that the men appointed to the Board of Health had

“exposed themselves to a heavy responsibility on behalf of their fellow citizens, are required to exercise an unceasing vigilance in this department, and doubtless they will find in the Government Agents, at all times, most ready and willing assistants.”³³ By defining their colonial counterparts as little more than eager assistants, the Board of Health was forcefully declaring its primacy in coordinating the battle against typhus.

This sort of confident assertiveness is hardly surprising, given the composition of the Board of Health. The city’s mayor, John Easton Mills, chaired the body. Illustrating the degree to which public health continued to be conceived primarily as a law and order issue, the entire municipal Police Commission was included in its ranks. These were civic élites who already had a stake in overseeing efforts to bring about a more orderly urban environment. The commission had met on a regular basis since the municipality was established at the beginning of the decade, and fielded petitions and complaints relating not only to the police force, but to any matter that could be placed under the umbrella of public order. Its members included prominent local figures like Jean-Louis Beaudry, John Glennon, and Alfred Larocque. The Board of Health’s membership was rounded out by the appointment of a doctor and a prominent citizen from each of the city’s seven wards, a process that insured that the body reflected the city’s ethnic composition.³⁴ Like other municipal bodies established in the city during this period, the Board of Health was composed of men from both sides of Montreal’s ethnic and political divide.

The colonial administration responded by convening the Emigrant Committee that had been founded in 1840 to deal with issues that related to managing migration. This body, unlike the municipal Board of Health, did not attempt to reflect the city’s ethnic heterogeneity, instead drawing its members from the city’s British Protestant élite, the majority of whom were supporters of the current Tory administration. It included Samuel Mathewson, Jacob DeWitt, John Leeming, William Workman, and was chaired by Adam Ferrie, one of the city’s leading commercial magnates. Interestingly, John Easton Mills was also appointed to the Emigrant Committee, perhaps in an effort to demonstrate a colonial openness to local input.

The Board of Health quickly weighed in on the two major governance issues that had emerged from the typhus epidemic. First, they underlined the fundamental importance of sanitary reform. “Citizens,”

they proclaimed, “have a duty to follow the directions laid out by the board about waste disposal.”³⁵ The report explained how disease was linked to the manner in which waste was disposed of in densely populated cities like Montreal, where garbage dumped in the winter decomposed in the summer, “creating harmful effluvia that poisons the air in large neighbourhoods.”³⁶ This was not, they emphasized, an undertaking that could be carried out by a small group of activists, but one that needed to be imposed upon every resident of the city. A family that chose to follow the sanitary directives laid out by the board could still be placing themselves in immense danger if their neighbours were less engaged with the issue, as they “must endure the nuisance equally with the dirty people who have caused it.”³⁷

These concerns about the city’s sanitary conditions did not originate with the typhus outbreak. Demands that more investment be made and regulations enforced with regards to garbage disposal, drainage, and sewerage had risen to the top of the agenda of reform-oriented civic élites across Britain, Europe, and North America, and an outbreak of epidemic diseases simply provided more justification for their agenda. This was due in large part to the widespread belief that these sorts of diseases flourished in unhealthy environments.³⁸ The minutes of the Board of Health’s bi-weekly meetings, frequently reprinted in the local press, are filled with local residents testifying about threats to public health they had encountered in their own neighbourhoods. This often entailed providing damaging information about their neighbours — acts that might very well have been rooted in longstanding interpersonal conflicts.³⁹

The centre-piece of the Board of Health’s response to the typhus epidemic was its proposal to relocate the emigrant sheds. Rather than housing the Irish emigrants along the banks of the Lachine Canal basin on the city’s southwestern fringe, the board’s plan called on the colonial government to hand over the funds necessary to build a new quarantine station on land that was more removed from the city. After weighing the merits of a number of locations, they proposed building a facility on the Îles-de-Boucherville, which were located 20 kilometres down the St. Lawrence River from Montreal’s harbour.⁴⁰ To members of the board there was little downside to this proposal. As thousands of destitute and ill migrants continued to pour into Montreal every week the sheds along the Lachine Canal, located just a stone’s throw from the city’s swelling

western suburbs, were quickly approaching their maximum capacity.

At the beginning of July a delegation of civic élites from Montreal wrote a lengthy letter to Governor Elgin to warn him that the current infrastructure in place on Grosse Île would not be sufficient. They warned Elgin that the disease could spread quickly through the interior even if only a handful of infected people managed to slip past the overburdened medical officials stationed there. They urged the governor to intervene in London to demand that the imperial government engage with the issue.⁴¹ Elgin responded to the petition nearly one month later, and offered little of substance. He assured the petitioners that he had been keeping the Secretary of State of War and the Colonies informed about the epidemic, and that the entire imperial administration was deeply saddened by the suffering that the epidemic had unleashed. He paid tribute to the clergymen and women who risked their lives on a daily basis to provide compassion and care to the emigrants in their moment of desperation, and agreed in principle that the emigrant sheds would be more secure if they were located further away from the city. But Elgin was not prepared to leap into action. Moving the sheds was a proposal that would have to come under a great deal more study, and there was no chance that a decision could be made before the following summer. This response, with its demands for patience, provided little comfort to those who were demanding that the imperial government snap into action with swift and sweeping reforms.

The views of Montrealers on the unfolding crisis were shaped by their strong sensory experience of the crisis, which they reached simply by walking down to the city's waterfront, where they could see destitute migrants suffering the agonies of typhus while sprawled across the harbour's wharves. In early June, Trinity House had passed a series of new ordinances that forced steamboat operators carrying more than 100 passengers from Grosse Île to drop them off directly at the emigrant sheds rather than in the harbour, but the ordinances were frequently ignored.⁴² A Board of Health report published in the local press at the beginning of July contained testimony from Dr. McCulloch that underlined the inability of the authorities to enforce the more stringent measures it was adopting during this crisis. McCulloch noted that after one of their recent meetings at City Hall he joined the mayor in a small delegation that made its way down to the port, where they witnessed several people

who were evidently quite ill lying about. To the great surprise of the delegation, their visit coincided with the arrival of *The Queen*, one of the largest steamboats that worked the Montreal-Quebec City corridor on the St. Lawrence River. The ship docked at the port and dropped off 831 men, women, and children. Many appeared to be on the brink of death, and the delegation overheard that there had been casualties on board the ship during the short trip from the quarantine station at Grosse Île.

What caused more hand-wringing amongst the members of the Board of Health than the condition of the emigrants was the lack of government personnel on the ground at the port when the ship arrived. They later ascertained that the emigration agent appointed by the colonial government had temporarily left the city.⁴³ It was left to the members of the board to track down a police officer to have the migrants hauled away to the sheds, and McCulloch thundered in his testimony that more care should be taken by the authorities in making sure that the emigrants were being confined either to the sheds or the tents surrounding the General Hospital.⁴⁴ This must have been a bleak reminder to the members of the Board of Health of just how easily emigrants, who were so clearly stricken with typhus, could slip into the general population of the city.

Eye-witness accounts also revealed that there was a considerable degree of social interaction occurring between the emigrants, who were meant to be in isolation at the emigrant sheds, and Montrealers who lived in the surrounding neighbourhoods. When a farmer in the village of St. Gabriel, which was adjacent to the sheds, came down with symptoms of typhus, his family reported that emigrants who were meant to be under quarantine were slipping away from the medical personnel and walking to their farm to purchase milk.⁴⁵ Élite newspapers also warned their readers that the disease could spread directly into their homes if they hired domestic servants who had either passed through the sheds or come into contact with family members who had done so. They held up the example of the MacKay family, who had lost one family member to typhus in this manner.⁴⁶

In a city living under the ominous threat of an epidemic outbreak, though, seeing these men, women, and children on the cusp of death on the wharves raised serious doubts about the ability of the authorities to protect the city's residents from the disease. Advocating for the Îles-de-Boucherville plan became the public's outlet for voicing their concerns

about the colonial administration's handling of the epidemic. With disease lying in wait on the city's doorstep, they argued, how could anyone with the public interest in mind oppose a plan that would see the sick and destitute migrants quarantined until any lingering doubts about their health were put to rest? *La Minerve*, Montreal's leading French-language newspaper, expressed its support for the Îles-de-Boucherville plan in this sort of language, noting that the public had the right to protect themselves during a calamity of this magnitude. The people of Montreal, they argued, would not stand by while thousands of contagious migrants continued to be housed in sheds a short walk from the port and the city's western suburbs. They encouraged the public to make their voices heard if the government did not acquiesce to their demand.⁴⁷

Supporters of the Îles-de-Boucherville proposal insisted that this was simply the most reasonable solution for the colonial administration to take.⁴⁸ They drafted a letter to Governor Elgin that highlighted all of the plan's benefits. Unlike the sheds on the banks of the Lachine Canal Basin, the proposed facility would be able to serve effectively as a quarantine station, as travel between Montreal and the Îles-de-Boucherville would be difficult. The land available on the islands would make it far easier to segregate migrants infected with communicable diseases from those who were simply worn down from the taxing transatlantic voyage. The Îles-de-Boucherville plan was also made to appeal to those who were worried that these thousands of destitute migrants would loiter on the streets of Montreal over the winter, thereby becoming drains on charitable institutions, not to mention a threat to public order. Under the Board of Health's proposal, Montreal could be partially if not entirely extricated from the migratory path of the Irish — who would be able to board steamboats for the western hinterlands from the new quarantine station.⁴⁹

The new quarantine station was also defended as a more humane alternative to the current arrangement. Eye-witness accounts of daily life at the sheds printed in the local press painted a grim portrait of destitute and fever-stricken migrants crammed into narrow bunks that lined the hastily constructed buildings devoid almost entirely of sunlight.⁵⁰ Building the new quarantine station on the Îles-de-Boucherville provided the colonial government with an opportunity to wipe the slate clean — the plan to quarantine emigrants at the sheds on the Lachine Canal Basin was, after all, devised by the authorities before they were

able to grasp the full magnitude of the 1847 migration. The reform-oriented liberalism of the period was summoned as a means of legitimizing the plan: A new facility could be made better equipped to foster the transformation of destitute migrants into productive citizens.

The colony's leading medical journal, the *British American Journal of Medical and Physical Science*, published a number of editorials over the course of the epidemic and its immediate aftermath that documented Montreal's handling of the crisis, the events unfolding at Grosse Île, and summarized the latest research into how typhus spread. The journal's editorial position suggests that there was widespread support in the medical community for stricter quarantine policies. Writing in August, as the debate over the colonial administration's refusal to fund the plan proposed by the Board of Health reached its climax, the editor of the journal noted his vigorous support for the Îles-de-Boucherville plan. Citing research into typhus and other fevers that were contracted on board overcrowded and poorly ventilated ships, the editorial pointed to evidence that a considerable number of people who contracted these illnesses only did so weeks after disembarking at their port of destination. With that being the case, the editorial called upon the colonial government to impose a quarantine of somewhere between three weeks and one month.⁵¹

Advocates of the Îles-de-Boucherville plan were also able to draw upon the conventional wisdom of the period, which linked the spread of contagious diseases to insalubrious environments from which unhealthy miasmas spread.⁵² The land where the emigrant sheds were located was considered by adherents to this theory of contagion to be particularly problematic. In demanding that the emigrant sheds be moved, they noted that the low-lying land the sheds had been built on was notorious for flooding. One resident familiar with the area rose to speak at one of the mass public meetings held at Bonsecours Market to demonstrate public support for the second quarantine station and reported that the area was often dotted with pools of stagnant water, which were closely linked to disease in the public imagination during this period.⁵³ The presence of these sorts of cesspools, especially when combined with the stifling humidity of a Montreal summer, was the perfect environment for an outbreak of an epidemic disease to appear and spread. If diseases like typhus were hatched in noxious environments and spread through the air, having the sheds located on land that perfectly fit that description such a

short distance from Montreal's most populous neighbourhoods gave residents of the city reason to be concerned. This was not the only environmental drawback to the current arrangement — a number of commentators noted that the authorities ought to be concerned that emigrants were drinking and bathing in water that was shared by Montrealers. The Îles-de-Boucherville quarantine station would have the added benefit of relocating emigrants down the river from Montreal.⁵⁴

Those who favoured the miasmatic theory of disease transmission decried the current location of the emigrant sheds. For them, the benefit of the Board of Health's plan was that it would move emigrants closer to the river, where the diseases that they had acquired during their migration would be pushed away by the stiff breezes on St. Lawrence River. This group lent their support to any plan that put the emigrants in closer proximity to the river. A letter printed in the *Gazette* made the case for housing the emigrants on Île Ste-Hélène, located directly across from Montreal's harbourfront, and argued, "what a difference would it then prove to the parched lips of the poor emigrant, to have at his side abundance of this almost necessary element to his recovery."⁵⁵

Supporters of the Îles-de-Boucherville plan maintained that there was a social logic to it as well. Not only would a new quarantine station on the Îles-de-Boucherville be more beneficial to the health of the emigrants, but it would also protect them from the criminal elements who preyed on the destitute men, women, and children shortly after landing in Montreal. Cheating desperate emigrants out of money and personal effects had become something of a cottage industry along the city's waterfront, and advocates of the new quarantine station insisted that "sharpers" would be unable to ply their trade if the emigrant sheds were removed from the Lachine Canal Basin.⁵⁶ Rumours were circulating that young female Irish emigrants were turning to prostitution, an accusation that was confirmed by an anonymous gentlemen with links to the Magdalene Asylum, who told the *Gazette* that several young women had sought refuge with the Magdalene sisters after being lured into the trade. This was put forward by supporters of the Board of Health as further evidence that the current arrangement with the sheds was doing no favours to the emigrants.⁵⁷

The numerous arguments put forward by supporters of the Îles-de-Boucherville plan return to a single common thread — that unlike what was currently occurring on the banks of the Lachine Canal Basin, the pro-

posed new facility would be able to function effectively as a quarantine station. While providing a humane refuge to emigrants that would be conducive to their physical rehabilitation, the new facility would be able to prevent contact between sick emigrants, their healthy counterparts, and the people of Montreal. The plan was pitched as a way to return order to the emigration process, which had crumbled into disarray due to the sheer magnitude of the 1847 migration and the public health crisis that accompanied it. With the emigrants and the facilities needed to house and care for them moved out of the city to an island down the St. Lawrence River and accessible only to medical personnel, civic officials, and religious aid workers, the scenes of disorder that had been making such a profound sensory impact on Montreal since the beginning of the shipping season would be removed. There would be no more gaunt figures lying in agony on the wharves, no more tents hastily erected on the grounds of the Montreal General Hospital, and no more fever sheds lurking ominously on the city's southwestern fringe. The movement in support of the plan can thus be read as an attempt on the part of a group of civic élites to restore public confidence in their ability to govern effectively and rationally in the midst of a profound public crisis. This was particularly important at a moment when their authority was being challenged and resisted in very visible ways. Steamboat operators were ignoring the emergency regulations put in force by the Board of Health⁵⁸ and migrants were moving back and forth between town and the emigrant sheds with impunity, two acts that the public viewed as evidence that civic officials were struggling to assert their authority in the midst of the crisis.

After carefully weighing the benefits of the Îles-de-Boucherville plan, the Emigrant Committee appointed by the colonial administration announced in July to howls of public indignation that they would not be pursuing the proposal. While facing widespread accusations that they were being reckless with regards to the public health, the men appointed to the Emigrant Committee carefully laid out their justification for maintaining the status quo. They led off by stating that the Board of Health had simply not put a great deal of thought into the logistics of the plan, noting that building a state-of-the-art quarantine facility on an island that was a considerable distance from the city was not a realistic proposal in the midst of a public crisis. Even at the existing sheds, local authorities were reportedly struggling to keep labourers on the payroll, given their

legitimate fears about contracting typhus from the emigrants confined in the area.⁵⁹ As was often the case when epidemic diseases prompted governing officials to consider adopting quarantine measures, the authorities in question struggled to balance the competing demands of a public for protection from contagious diseases, migrants resistant to being prodded by doctors and detained against their will, and commercial interests who protested against any impediment to the shipping industry.⁶⁰

The Emigrant Committee further justified its decision by maintaining that the proposal to move the emigrants to the Îles-de-Boucherville would have infringed too dramatically on the rights of emigrants. From the migrant's perspective, after all, the proposal put forward by the Board of Health would require them to pass through two quarantine stations before being allowed to settle in British North America. For an Irish man, woman, or child, the migration undertaken in 1847 likely began in a rural village crumbling under the pressure of famine, typhus, and social violence, and was then followed by a journey via steamboat to a port city on the west coast of Britain, already teeming with other migrants struggling for food and shelter. Those who could afford it then boarded ships for North America, which, even for those who had some means at their disposal, was a harrowing experience. The transatlantic passage already concluded with a long, chaotic, and likely intimidating interlude in quarantine at Grosse Île, an experience that the Board of Health and its supporters now wanted to compel them to repeat as they neared Montreal.⁶¹ The Emigrant Committee also framed this moral argument in economic terms by noting that the colony would, in the long-term, benefit from this influx of people who would surely become productive citizens. "Should these fellow subjects ... be detained on an island," their statement read, "they would be almost forced to become dependent upon Government, by putting it out of their power to make arrangements for themselves."⁶²

While the Emigrant Committee's statement prompted a wave of public fury, it illustrates a compelling alternative interpretation of the activities taking place on the Montreal harbourfront throughout the summer of 1847. While the Board of Health, the majority of civic élites, and what appears to have been a sizable swath of public opinion, saw the desperation and misery of the Irish emigrants landing in the vicinity of the city as a threat to public order, the Emigrant Committee saw the same scenes as a necessary by-product of economic growth and a symbol

of a particularly British drive towards self-improvement in the face of crisis.⁶³ By dramatically expanding the duration of the period emigrants spent sequestered in quarantine, the Emigrant Committee argued, the plan proposed by Montreal's Board of Health risked having Irish migrants become dependent on government support. The report that they published drew repeated attention to the fact that over half of the emigrants who had passed through Montreal since the beginning of 1847 had paid for their own transatlantic passage, and had thereby earned the right to be treated judiciously by the authorities there, despite the public's concerns about disease. These numbers, they argued, were high despite the misery and deprivation that marred the migration of 1847. In previous years, over three quarters of the emigrants arriving from Ireland and the British Isles had paid for their own passage. The underlying message here was that colonial officials were concerned that the Board of Health's proposals would have the long-term consequence, be it intentional or not, of damaging the Province of Canada's ability to attract self-sufficient emigrants to the colony.⁶⁴

The Emigrant Committee concluded its response to the Board of Health by asking some pointed questions about the sort of government that citizens desired. The plan that they were rejecting, while wrapped in a hearty dose of rhetoric about protecting residents of Montreal and providing a secure and salubrious refuge to the weary emigrant, was, in fact, built upon a foundation of "despotic" and "strenuous coercion."⁶⁵ What looked like cold indifference to supporters of the Board of Health's plan was, the Emigrant Committee maintained, an attempt to balance the demands being made by the Montreal public for decisive action with the rights of emigrants to not be confined any more than was necessary.

In an effort to address the public outcry that they knew would greet their report, the Emigrant Committee went to great lengths to assure the public that the measures already taken by the colonial administration to address the typhus epidemic were adequate. The public, they argued, simply needed to demonstrate a degree of patience and restraint. They wrote that plans were already being undertaken to ensure that the time the emigrants spent in close proximity to the city was minimized. In fact, the Emigrant Committee argued that many of the supposed benefits of the Board of Health's proposals were under construction and would soon be integrated into the current arrangement. New fever hospitals, which they

hailed as being “spacious and airy,” were on the verge of completion at Point St. Charles, which would allow for a much more effective segregation of the sick from the healthy. By keeping all of these facilities in the vicinity of Montreal the authorities would be able to identify the emigrants who had fallen ill while infringing as lightly as possible on those who were healthy but had to remain in Montreal while their family members recuperated in isolation.⁶⁶ While not explicitly making a statement of regret for the way that the emigrant sheds had been governed up to that point, the Emigrant Committee laid out its plans for the more effective policing of the area surrounding the facility, noting that plans were being drawn up for the construction of a strong fence around the facility, with gates guarded by police officers tasked with preventing any communication with the outside world. Measures would be put in place to move these healthy emigrants to new sheds constructed along the Lachine Canal that would be free of disease. Upon their arrival they would be registered by government officials who would then coordinate their transportation onward to Canada West as quickly and efficiently as possible.⁶⁷

Supporters of the colonial administration’s approach to the epidemic went to considerable lengths to dispel the accusation that their strategy for dealing with the dire conditions faced by the emigrants pointed to a lack of compassion. Instead, they accused those who were demanding the removal of the emigrant sheds of simply wanting the destitute migrants moved out of sight so that they would not be confronted with their suffering on a daily basis. Lewis Drummond, a vocal opponent of the Tory administration, vigorously denied the accusation. He argued that Montrealers of every political stripe had proven their compassion and humanity countless times throughout the crisis of 1847, but that they did not have to accept the existence of a “Field of the Dead” mere steps away from the city.⁶⁸

Opponents of the colonial administration’s approach to the typhus epidemic bristled at allegations coming from the Tory press and the Emigrant Committee that their proposals were reckless and unrealistic. They pointed to other jurisdictions in Britain, British North America, and the United States that had taken much more decisive action than Montreal and, in doing so, appeared to have more effectively shielded their citizens from the typhus epidemic and the other social ills that accompanied the massive wave of Irish emigration. Liverpool, facing an influx of Irish emigrants exponentially greater than Montreal, decided by

the summer of 1847 to begin using public funds to transport Irish emigrants who could not support themselves back to Ireland.⁶⁹ On this side of the Atlantic Ocean, several American jurisdictions had imposed levies and restrictions on emigrants that were proving to be highly effective in diverting the flow of emigrants to American port cities like New York.⁷⁰ Closer to home, meanwhile, the small Canada West city of Brockville had simply elected to ban ship-owners from depositing Irish emigrants on their docks, forcing them to push onwards up the St. Lawrence River towards Lake Ontario and the city of Toronto.⁷¹ A frustrated and agitated public demanded to know why the authorities in Montreal could not impose the same kinds of restrictions on emigration.⁷²

The position taken by the Emigrant Committee, which they acknowledged in their preface had “given great dissatisfaction,” demonstrates the degree to which the science surrounding contagious disease remained deeply contested in the mid-nineteenth century. They dismissed the public’s fears about typhus spreading via miasmas carried on the wind from the emigrant sheds. They noted that the only people who had fallen ill with the disease other than the emigrants themselves were those who had come into repeated contact with them, such as the members of the religious orders providing medical care to the migrants and the government officials stationed at the sheds. While they conceded the assertion of the Board of Health that contagious diseases could be spread through the air, they denied that maintaining the emigrant sheds on the banks of the Lachine Canal posed a threat to the residents of Montreal. Their assertions were seconded by the Medical Commissioners appointed by the colonial government,⁷³ who explained in their report that, due to the prevailing winds and the impact that the rapids in the St. Lawrence River had on air currents in the vicinity of Montreal, the likelihood of typhus being spread via miasmas into the city was all but impossible. Like their counterparts on the emigrant committee, the Medical Commissioners argued that there was no rational justification for dismantling the emigrant sheds on the banks of the Lachine Canal. Supporters of the colonial government’s decision downplayed the fact that by rejecting the Board of Health’s proposal they were avoiding a considerable public expense, though that was in keeping with their ideological commitment to budgetary restraint.

Despite the active protest of thousands of Montrealers who signed petitions and attended public meetings to demand that emigrants be

quarantined well outside the city limits, colonial officials were adamant that the general public was not being placed at risk by their refusal to budge on this front. In the days following the colonial government's rejection of the proposal to build a new quarantine station on the Îles-de-Boucherville, public outrage was reignited when the colonial office ordered tents to be erected on the grounds of the Montreal General Hospital in order to provide shelter to the overflow of typhus patients at the hospital and the emigrant sheds. Denis-Benjamin Viger, a prominent local politician who had grown critical of the colonial authorities' handling of the events of 1847, rose to protest this particular decision in parliament. Viger and other critics of the colonial administration pointed to the tents on the grounds of the hospital as yet another symbol of the government's lack of initiative when it came to addressing the typhus epidemic. All of the studies that colonial officials were brandishing in an attempt to demonstrate that the public was not at risk of contracting typhus from the emigrants were worthless, Viger maintained, in the face of the public knowledge that people in every single Montreal neighbourhood had been struck by the disease.⁷⁴ Viger painted a bleak picture of the city that the colonial administration's allegedly hands-off approach to addressing the epidemic had created, one with a landscape dotted with hastily erected emigrant sheds and hospital tents, where fear of contracting typhus hung over every single household, and where gaunt, fever-stricken emigrants huddled on the wharves. Viger was not alone in pinning the colonial administration with the blame for the precipitous drop in commercial activity that accompanied the epidemic, as merchants and other visitors from the United States, Britain, and the city's immediate rural hinterland began avoiding Montreal for fear of contracting the disease. An editorial in *La Minerve* echoed Viger's observations, describing the eerie quiet that blanketed the city's streets.⁷⁵

The defenders of the Tory-led colonial administration did not let these sorts of allegations and insinuations pass without comment. They accused their political foes, which included certain members of the Board of Health appointed by the municipal government, of causing damage to Montreal's reputation and for needlessly sowing panic in a community that was already reeling from a public health crisis. With legitimate authority during this period being so closely linked to a public figure's ability to demonstrate composure and restraint, the Emigrant

Committee's suggestion that members of the Board of Health lacked the resolve to stand up to public opinion and were needlessly panicked was a highly contentious and political allegation. The Emigrant Committee vowed not to bend to the demands of a frightened public in the way that the Board of Health had done with their impractical plans for building an entirely new quarantine station from scratch on a not easily accessible island down the river from the city.⁷⁶ These sorts of character attacks were common in the fraught political landscape of mid-nineteenth-century Montreal.⁷⁷ It was during moments of crisis like the typhus epidemic that politicians looking to meet these requirements came under the most scrutiny, and when references to these prerequisites for engaging in public life were discussed most vigorously.⁷⁸

One consistently contentious point throughout the epidemic was whether or not political élites ought to discuss the abysmal conditions found at the emigrant sheds. Critics of the Tory administration maintained that this should be a matter of public knowledge, while Tories countered that the members of the Reform faction appointed to the Board of Health were simply trying to stir up popular hysteria for political ends, and in doing so were damaging Montreal's reputation.⁷⁹ As much as these two political factions might have been divided by the different solutions they were proposing to deal with the public health crisis, they shared this language that placed a heavy premium on composure and restraint.⁸⁰ The first report of the Board of Health, with its stern warnings about the need for the more effective policing of sanitary infractions, placed a great deal of emphasis on how these measures ought to be undertaken in an atmosphere of calm and restraint. They insisted, for example, that the situation provided grounds for "precaution rather than alarm."⁸¹ Despite the public's alarm about the epidemic, political élites from both factions used the unfolding crisis to demonstrate their ability to remain composed and restrained in such a climate, an assertion that they hoped would have positive implications in a larger political context.

In essence, the Emigrant Committee had laid out a project of reform that would see the sheds along the Lachine Canal upgraded to a full-fledged quarantine station that would more effectively capture the balance between the need to quarantine sick emigrants before they dispersed into the general public, while not infringing too heavily on the liberty of the emigrants themselves. It demonstrates how two competing

bodies of governing élites, in a moment of crisis, were actively engaging in the process of thinking through liberal governance. The Board of Health had proposed measures that tackled the epidemic and the larger crisis around emigration as a governance problem that could be improved with a more effective infrastructure. It spoke in the reform-oriented language of the day by suggesting that the suffering of both migrants and the fears of the Montreal public could be addressed simultaneously by investing in an infrastructure that would make the entire migratory process more efficient and effective. The measures that were adopted by the Emigrant Committee expressed similar aspirations about reforming the infrastructure around migration, but were concerned that the Board of Health might have been overstating the efficiency of their proposal, that it marked a small but important step towards a more authoritarian style of governance with regard to the rights of emigrants, and that it placed too heavy a burden on the public purse.⁸²

Historians of public health have long noted the tension inherent in the adoption of quarantine as a means of dealing with an outbreak of epidemic disease. On the one hand, it demonstrates the ability of the state to harness its resources in an extremely concentrated fashion in order to protect its citizenry. In doing so, however, it exposes local authorities to continuous challenges to their authority, which comes in a variety of forms. This was certainly the case in Montreal during the summer of 1847. Steamboat operators flagrantly ignored the restrictions that Trinity House attempted to impose regarding where emigrants were permitted to disembark in the city; the relatives and friends of the emigrants being detained in the sheds along the banks of the Lachine Canal frequently breached the perimeter of the area in order make contact with them; and those same emigrants, after a long and taxing migratory journey, often attempted to conceal the outwardly visible symptoms of illness in order to hasten their dismissal from the quarantine process. All of these acts amounted to a highly public demonstration of how, in the face of a complex public crisis like a transnational outbreak of epidemic disease, officials at the civic, colonial, and imperial level faced severe and problematic limitations on their authority.⁸³ The often conflicting responses to the epidemic also illustrate the competing social, political, and economic visions present in a liberal society — from those with an isolationist perspective to the commercial interests who devoted them-

selves to attacking any attempt to impose restrictions on transatlantic and international commerce.⁸⁴ How the authorities juggle these competing demands can tell us a great deal about how competing factions of the élite in Montreal balanced ideological approaches to governance and the demands of an assertive public sphere.

In recent years historians have pointed to the middle of the nineteenth century as a moment when British North America's political élite embarked on a liberal project.⁸⁵ While this approach to governance affected urban Canadians in their daily lives, it was during moments of crisis like the typhus epidemic of 1847 that the public debated the contours of those values. The heated debate over how to address the public health crisis unfolding in Montreal illustrates the flexibility of those governing principles. The debate over quarantine that pitted the officials appointed by the colonial administration against the Board of Health, appointed by the municipal government, was not a confrontation between liberalism and *ancien régime* values. Both bodies adhered, broadly speaking, to the liberal values that were in the process of re-ordering social and economic relationships across the North Atlantic world during this period. They both saw a need for various tentacles of the state to more effectively manage a disorderly situation, yet believed that there was merit in doing so with a certain degree of restraint. In the midst of this crisis, both bodies remained focused on the larger project of shaping sick and destitute migrants into productive citizens. These shared values, however, did not produce a singular response to the crisis at hand — local conditions continued to produce very different approaches to governance. Montreal was a city whose confrontation with typhus was shaped by its commercial position in British North America, its recent history of sectarian and political conflict, and the jurisdictional tension between the civic, colonial, and imperial governments that had a stake in the response.

In August, as deaths from typhus and the arrival of emigrants began their steady decline, the Board of Health issued its final report, which heaped scorn upon the colonial administration for their perceived lack of support throughout the crisis. In order for a body like the Board of Health to make a positive impact during a public health crisis, they argued, they would have required greater financial resources and exclusive powers. Instead, the report argued, the Board of Health was forced to operate on a shoestring budget, and much of their time was taken up with

jurisdictional squabbling with the Emigrant Committee appointed by the colonial administration and Trinity House. When the civic government established the Board of Health they did so with sweeping rhetoric about the extraordinary powers that the body had been granted. It was not long before the physicians and civic élites appointed to the board began to realize that these much-vaunted powers were “illusory.”⁸⁶ The practical solutions that might have made a real impact on the city’s bout with typhus — like diverting emigrants from the city, regulating the conditions onboard the ships that ferried emigrants to the colony and up the St. Lawrence River, ensuring that the conditions in the emigrant sheds were conducive to recuperation and good health — all fell under the jurisdiction of other bodies and levels of government. Forced to operate under these stifling limitations, the only activity that the Board of Health could really engage in were sanitary inspections of the city, but even then they had to report violations that they discovered to the civic government, who would pursue the matter through the police force.⁸⁷

By the end of the summer of 1847, the typhus epidemic was beginning to subside, but the city was staggering under the weight of loss. The emigrant sheds along the banks of the Lachine Canal would continue to operate until the spring of 1848, although the number of patients housed within its walls would drop steadily from its peak reached the summer before. In many ways, history repeated itself as fears of a more general outbreak of typhus receded. As was the case in 1832, many of the emergency measures put in place in an effort to halt the spread of the disease were eliminated once the threat subsided.⁸⁸ That the crisis did not lead to an immediate overhaul of the colony’s approach to managing migration and public health should not lead us to dismiss the epidemics that struck Montreal in the first half of the nineteenth century as simply the pre-history of the public health movement that emerged in the city in the 1850s and 1860s.⁸⁹ While the sanitary regulations imposed by the Board of Health disappeared along with it, the idea that private property could be subject to policing in order to insure that the public was not being placed in danger by the recklessness of private citizens was given a significant boost by the epidemic. The decade that followed brought about a huge increase in public and private investment in drains and sewers.⁹⁰ The epidemic also fuelled an emerging consensus that the colonial administration ought to play a more active role in regulating migration

into the colony.⁹¹ Anger towards the imperial government for their perceived lack of engagement with the epidemic, along with their perceived mishandling of the crisis in Ireland, added legitimacy to the argument that local élites needed to gain greater autonomy in the management of colonial affairs.⁹² Local officials, including one of the men who had served on the Emigrant Committee, argued that it was the imperial government's responsibility to regulate transatlantic migration more effectively. Colonial politicians were especially vocal in demanding that Britain reform its Passengers Act, in order to improve sanitary conditions on board ships making the transatlantic voyage, in the hopes that emigrants would arrive in Canada in better health than they had in 1847.⁹³

During the summer of 1847 Montreal was shaken by a transnational crisis rooted in how people, ideas and goods circulated the North Atlantic world in the age of global capitalism and liberal governance. The debates prompted by the Irish famine migration and the typhus epidemic that accompanied it provide a glimpse into how political élites and the broader public were thinking through the challenges posed by the rapid social transformation unfolding around them. While political élites might have reached a consensus that public health and emigration needed to be effectively managed by government bodies, the contours of such measures were open to vigorous debate and countless acts of resistance. Moments such as this allow us to trace the development of the liberal project of governance in Canada. They push us to consider the role that social crises played in this process, as these moments of individual and collective vulnerability were when the impact of government intervention weighed most heavily on the public consciousness. In the case of Montreal, a city where the global transformations of the mid-nineteenth century left a deep mark on the social fabric, the events of 1847 played a crucial role in shaping how political élites and the broader public were thinking through issues surrounding urban governance, migration, and the role of government as the city grew from a colonial outpost into an industrial metropolis.

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Endnotes:

- 1 The authour would like to thank Michel Ducharme and the five anonymous peer reviewers for their helpful suggestions on this essay.
- 2 For a thorough and insightful overview of the epidemic in Montreal, see Maude Charest-Auger, "Les réactions montréalaises à l'épidémie de typhus de 1847" (Montréal : Mémoire de maîtrise, Université du Québec à Montréal, 2012).
- 3 Anne Hardy, "Urban Famine or Urban Crisis? Typhus in the Victorian City," *Medical History* 32 (October 1988): 401–25.
- 4 Several recent contributions to the historiography of the Irish famine have identified the crisis as a product of liberal colonial governance. For example, see Dave Nally, *Human Encumbrances: Political Violence and the Great Irish Famine* (South Bend, IN: University of Notre Dame Press, 2011); Phillip O'Regan, "'A dense mass of petty accountability': Accounting in the Service of Cultural Imperialism during the Irish Famine, 1846–1847," *Accounting, Organizations and Society* 35, no. 4 (May 2010): 416–30; Christine Kinealy, *A Death-Dealing Famine: The Great Hunger in Ireland* (London: Pluto Press, 1997) and *ibid.*, *The Great Irish Famine: Impact, Ideology and Rebellion* (London: Palgrave, 2002). For more on the Irish famine migration to North America, see Donald MacKay, *Flight from Famine: The Coming of the Irish to Canada* (Toronto: McClelland and Stewart, 1990); Andy Beilenberg, ed., *The Irish Diaspora* (London: Longman, 2000); Kirby Miller, *Emigrants and Exiles: Ireland and the Irish Exodus to North America* (Oxford: Oxford University Press, 1985); and both Kinealy studies.
- 5 Jeffrey McNairn, *The Capacity to Judge: Public Opinion and Deliberative Democracy in Upper Canada, 1791–1854* (Toronto: University of Toronto Press, 2000).
- 6 Michel Ducharme, *Le concept de liberté au Canada à l'époque des Révolutions atlantiques, 1776-1838* (Montréal-Kingston: McGill-Queen's University Press, 2010). For an international perspective on this process, see Geoff Eley, "Nations, Public and Political Cultures: Placing Habermas in the Nineteenth Century," in *Habermas and the Public Sphere*, ed. Craig Calhoun (Cambridge: The M.I.T. Press, 1992), 289–332; and Catherine Hall, "The Rule of Difference: Gender, Class and Empire in the Making of the 1832 Reform Act," in *Gendered Nations: Nationalisms and Gender Order in the Long Nineteenth Century*, eds. Ida Bloom, Karen Hagemann, and Catherine Hall (Oxford: Oxford University Press, 2000), 107–35.

- 7 Ian McKay, "The Liberal Order Framework: A Prospectus for a Reconnaissance of Canadian History," *Canadian Historical Review* 81 (December 2000): 617–45; Michel Ducharme and Jean-François Constant, "Introduction: A Project of Rule Called Canada — The Liberal Order Framework and Historical Practice," and Ian McKay, "Canada as a Long Liberal Revolution: On Writing the History of Actually Existing Canadian Liberalisms, 1840s–1940s," in *Liberalism and Hegemony: Debating the Canadian Liberal Revolution*, ed. Jean-François Constant and Michel Ducharme (Toronto: University of Toronto Press, 2009), 3–32; 347–452; Cecilia Morgan, *Public Men and Virtuous Women: The Gendered Languages of Religion and Politics in Upper Canada, 1791–1850* (Toronto: University of Toronto Press, 1996).
- 8 Jean-Marie Fecteau, *La liberté du pauvre: sur la régulation du crime et de la pauvreté au XIX^e siècle québécois* (Montréal: VLB, 2004); Jean-Marie Fecteau, *Un nouvel ordre des choses: la pauvreté, le crime et l'État au Québec, de la fin du XVIII^e siècle à 1840* (Outremont: VLB, 1989); Ian Radforth and Allan Greer, eds., *Colonial Leviathan: State Formation in Mid-Nineteenth-Century Canada* (Toronto: University of Toronto Press, 1992).
- 9 For more on mid-nineteenth-century liberal governance, see Patrick Joyce, *The Rule of Freedom: Liberalism and the Modern City* (London: Verso, 2003); Uday Singh Mehta, *Liberalism and Empire: A Study in Nineteenth-Century British Liberal Thought* (Chicago: University of Chicago Press, 1999).
- 10 A powerful case study of this process can be found in Bruce Curtis, *The Politics of Population: State Formation, Statistics and the Census of Canada, 1840–1875* (Toronto: University of Toronto Press, 2002).
- 11 Howard Markel, *Quarantine: Eastern European Jewish Immigrants and the New York City Epidemics of 1892* (Baltimore: Johns Hopkins University Press, 1997); Charles Rosenberg, *The Cholera Years: The United States in 1832, 1849 and 1866* (Chicago: University of Chicago Press, 1962); Micheal Bliss, *Plague: A Story of Smallpox in Montreal* (Toronto: Harper Collins, 1992); Esyllt Jones, *Influenza 1918: Disease, Death, and Struggle in Winnipeg* (Toronto: University of Toronto Press, 2007); Mark Harrison, *Disease and the Modern World: 1500 to the Present Day* (Cambridge, UK: Polity Press, 2004), especially chap. six, "The Individual and the State"; Marola Espinosa, *Yellow Fever and the Limits of Cuban Independence, 1878–1930* (Chicago: University of Chicago Press, 2009); Peter Baldwin, *Contagion and the State in Europe, 1830–1930* (Cambridge, UK: Cambridge University Press, 2004).
- 12 See Gerald Tulchinsky, *The River Barons: Montreal Businessmen and the Growth of Industry and Transportation, 1837–1853* (Toronto: University of Toronto Press, 1977).
- 13 See Bettina Bradbury, *Working Families: Age, Gender and Daily Survival in Industrializing Montreal* (Don Mills, Ont.: Oxford University Press, 1993); Sherry Olson, "'Pour se créer un avenir': stratégies de couples montréalais au XIX^e siècle," *Revue d'histoire de l'Amérique française* 51, no. 3 (hiver 1998):

- 357–89; Jean-Claude Robert, “The City of Wealth and Death: Urban Mortality in Montreal, 1821–1871,” in *Essays in the History of Canadian Medicine*, eds. Wendy Mitchinson and Janice Dickin McGinnis (Toronto: McClelland and Stewart, 1988), 18–38.
- 14 For more on nineteenth century demographic change in Montreal, see Sherry Olson and Patricia Thornton, *Peopling the North American City: Montreal 1840–1900* (Montréal-Kingston: McGill-Queen’s University Press, 2011).
- 15 Yves Lamonde, *Histoire sociale des idées au Québec, 1760–1896* (Montréal: Fides, 2000), 120–35.
- 16 Dan Horner, “Taking to the Streets: Crowds, Politics and Identity in Mid-Nineteenth-Century Montreal,” (Ph.D. diss., York University, 2010); Allan Greer, *The Patriots and the People: The Rebellion of 1837 in Rural Lower Canada* (Toronto: University of Toronto Press, 1993); James Jackson, *The Riot That Never Was: The Military Shooting of three Montrealers in 1832 and the Official Cover-Up* (Montréal: Baraka Books, 2009).
- 17 Roberto Perin, *Ignace de Montréal: Artisan d’une identité nationale* (Montréal: Boréal, 2008), chap. I.
- 18 See Jean-Marie Fecteau, “La dynamique sociale du catholicisme québécois au XIXe siècle: éléments pour une réflexion sur les frontières et les conditions historiques de possibilité du ‘social,’” *Social History / Histoire sociale* 35, no. 70 (November 2002): 507–8.
- 19 This group of reformers in Montreal have not been the exclusive subject of a study, but for a revealing examination of a similar network in New York, see David Scobey, *Empire City: The Making and Meaning of the New York City Landscape* (Philadelphia: Temple University Press, 2002).
- 20 For more on the transition from feudalism to capitalism in nineteenth-century Lower Canada, see Gérard Bernier and Daniel Salée, *Entre l’ordre et la liberté: colonialisme, pouvoir et transition vers le capitalisme dans le Québec du XIXe siècle* (Montréal: Boréal, 1995).
- 21 A number of commentators argued throughout the epidemic that Montreal should concentrate its resources on helping its “own” poor, rather than squandering their resources on the migrants passing through the city. For an example of this sort of rhetoric, see the letter written by Augustus Guly published in *La Minerve* (14 octobre 1847).
- 22 For more on the 1832 epidemic, see See Geoffrey Bilson, *A Darkened House: Cholera in Nineteenth-Century Canada* (Toronto: University of Toronto Press, 1980); and Robert. For a survey of Lower Canada’s emigration policy from the *ancien régime* to the twentieth century, see Martin Pâquet, *Tracer les marges de la cité: étranger, immigrant et État au Québec, 1627–1981* (Montréal: Boréal, 2005).
- 23 The Montreal press frequently reported on the British military’s efforts to suppress rioting and other acts of collective violence in Ireland in the midst of the disorder caused by the famine. See, for example, *Montreal Gazette* (8 June 1847).
- 24 For example, see *La Minerve* (14 février 1847).

- 25 For a helpful overview of these events, see K.H. Connell, "The Potato in Ireland," *Past and Present* 23 (November 1962): 57–71.
- 26 For a detailed account, see Kinealy, *A Death-Dealing Famine*.
- 27 MacKay; Kerby Miller, *Emigrants and Exiles: Ireland and the Irish Exodus to North America* (Oxford: Oxford University Press, 1985).
- 28 New York's legislation held the master's of ships responsible for the migrants that they were depositing in the state. The most significant clause in the legislation imposed fines on masters should any of the migrants in their care continue to be a reliant on public assistance in the State of New York more than two years after their arrival. When enacted in concert with other charges and restrictions, transporting migrants to New York became too risky a venture for shipping interests. For a description of the law and the opinion of Lord Grey of the British Colonial Office on its merits, see *Journals of the Legislative Assembly of the Province of Canada, Session 1848*, vol. 7 (Montréal: Rollo Campbell, 1848), Appendix W.
- 29 Scott See, *Riots in New Brunswick: Orange Nativism and Social Violence in the 1840s* (Toronto: University of Toronto Press, 1993); Graeme Wynn, *Timber Colony: A Historical Geography of Early Nineteenth-Century New Brunswick* (Toronto: University of Toronto Press, 1981).
- 30 *La Minerve* (1 July 1847).
- 31 It must be noted here that the municipal government was itself an institution that was still in its infancy in 1847, having only been established at the outset of the 1840s by the colonial administration. For more on the founding of Montreal's civic government and its liberal ethos, see Michèle Dagenais, "The Municipal Territory: A Product of the Liberal Order?" in *Liberalism and Hegemony*, 201–20.
- 32 See *La Minerve* (4 June 1847); *Gazette* (9 June 1847).
- 33 *Gazette* (14 June 1847).
- 34 *Montreal Gazette* (9 June 1847). The Board of Health's ranks also included Albert Larocque, Dr. McCulloch, William Speirs, Joseph Grenier, Wolfred Nelson, Dr. Bruneau, Dr. Peltier, and Pierre Darmour.
- 35 *Ibid.* (14 June 1847).
- 36 *Ibid.*
- 37 *Ibid.*
- 38 A number of tracts linking the sanitation of towns and public health were published and widely read in the 1840s. For example, see R.D. Grainger, *Unhealthiness of Towns: Its Causes and Remedies* (London: Charles Knight & Co., 1845); and Henry Scading, *Cleanliness Akin to Godliness* (Toronto: Diocesan Press, 1850).
- 39 For examples, see *Montreal Gazette* (5 July 1847). Some depositions describing sanitary complaints can be found in the records left by the Board of Health. Archives de la Ville de Montréal (hereafter AVM), Board of Health fonds, VM45 S1 SS2.

- 40 The Boucherville Islands were part of the seigneurie that was granted to Pierre Boucher in 1664, and the land was put into agricultural production shortly thereafter. By 1847, a sizeable piece of this seigneurial property was owned by brewing magnate John Molson, who kept a residence there. In the twentieth century it was briefly the site of an amusement park, before being established as Îles-de-Boucherville National Park in 1984.
- 41 *La Minerve* (1 July 1847).
- 42 Ibid. (4 June 1847). The *Gazette* carried out a campaign against steamboat operators who continued to ignore these regulations, printing their names in the paper in an effort to shame them into curtailing the practice. *Montreal Gazette* (5 July 1847).
- 43 *La Minerve* (1 July 1847).
- 44 *Montreal Gazette* (2 July 1847).
- 45 *La Minerve* (26 July 1847).
- 46 Ibid.
- 47 Ibid. (15 July 1847).
- 48 Supporters of the Îles-de-Boucherville plan included such civic heavyweights as Pierre Beaubien, Denis-Benjamin Viger, Benjamin Holmes, William Workman, and Charles Rodier. *Montreal Gazette* (13 July 1847).
- 49 These plans were often informed by memories of the cholera epidemics of 1832, which began in emigrant communities before quickly spreading out into the general population. For more on the reaction to the 1832 epidemic, see Bilson.
- 50 Among the most detailed and harrowing public accounts of life at the sheds was that made by Dr. Wolfred Nelson in parliament. See *Journals of the Legislative Assembly, Session 1847*, vol. 6, 478.
- 51 *The British American Journal of Medical and Physical Science* 3 no. 4 (August 1847): 107.
- 52 For a discussion of the debates on the miasmatic theory and typhus, see Margaret Crawford, "Typhus in Nineteenth-Century Ireland," in *Medicine, Disease and the State in Ireland, 1650–1940*, eds. Greta Jones and Elizabeth Malcolm (Cork: Cork University Press, 1999), 131.
- 53 *Montreal Gazette* (15 July 1847). The area around Montreal's harbourfront and the Lachine Canal had long been considered by civic élites and the broader public to be a nexus of social disorder. This was ground zero for the environmental and social transformations associated with industrialization. The area was home to many of the itinerant labourers who worked in the port. During the 1840s, it was home to Irish migrant labourers hired to expand the Lachine Canal. Facing the combined pressures of low wages and poor working conditions, the shantytowns built to house these labourers became the site of labour revolts and collective violence. See Jason Gilliland, "Muddy Shore to Modern Port: Redimensioning the Montreal Waterfront Time-Space," *Canadian Geographer* 48, no. 4 (Winter 2004): 448–70; Dan Horner, "Solemn Processions and Terrifying Violence: Spectacle, Authority and Citizenship during the Lachine

- Canal Strike of 1843,” *Urban History Review / Revue d’histoire urbaine* XXXVIII, no. 2 (Spring 2010): 36–47.
- 54 *Montreal Gazette* (2 July 1847). In addition to the danger this posed to Montrealers, a letter to the editor published in the *Gazette* reported that the shallow waters immediately adjacent to the emigrant sheds were particularly unhealthy, as they had long served as an informal dumping ground for the city. Observers reported seeing a number of horse corpses that had been disposed of in the area.
- 55 Ibid. (2 July 1847).
- 56 Ibid. (10 July 1847).
- 57 Ibid. (21 May 1847).
- 58 Ibid. (5 July 1847).
- 59 *Journals of the Legislative Assembly, Session 1847*, vol. 7, Appendix N, Report from the Commissioner of Public Works.
- 60 For an illuminating discussion of the legal history of quarantine, see Lawrence Gostin, *Public Health Law: Power, Duty, Restraint* (Berkeley: University of California Press, 2008).
- 61 The most comprehensive history of the Grosse Île quarantine station can be found in Marianna O’Gallagher, *Grosse Île: Gateway to Canada, 1832–1937* (Ste. Foy, Que.: Carraig Books, 1984).
- 62 *Journals of the Legislative Assembly of the Province of Canada, Session 1847*, vol. 6, 197–99.
- 63 Ibid.
- 64 Ibid. For more on early nineteenth century emigration to Canada, see Pâquet and Lisa Chilton, “Managing Migrants: Toronto, 1820–1880,” *Canadian Historical Review* 92, no. 2 (June 2011): 231–62.
- 65 Ibid.
- 66 Ibid.
- 67 Ibid.
- 68 *Montreal Gazette* (15 July 1847).
- 69 Ibid.
- 70 Ibid. (16 August 1847).
- 71 Ibid. (19 August 1847). For more on the 1847 typhus outbreak in Toronto, see Chilton.
- 72 *La Minerve* (19 August 1847).
- 73 The Medical Commissioners were Dr. McCulloch, Wolfred Nelson, Francis Badgley, Jasper Crawford, and Joseph Campbell, all of whom were physicians.
- 74 *La Minerve* (22 July 1847).
- 75 Ibid.
- 76 *Montreal Gazette* (15 July 1847).
- 77 See Dan Horner, “Shame upon you as men!: Competing Visions of Masculine Authority in the Aftermath of Montreal’s Gavazzi Riot,” *Social History / Histoire sociale* 44, no. 87 (May 2011): 29–52.

- 78 See Morgan; McKay, "Canada as a Long Liberal Revolution," 353–57.
- 79 For example, see the *Gazette's* attack on *The Pilot*, *Montreal Gazette* (9 July 1847).
- 80 The literature on Victorian masculinity emphasizes the importance placed on restraint and composure during this period. For example, see Matthew McCormack, *The Independent Man: Citizenship and Gender Politics in Georgian England* (Manchester, UK: University of Manchester Press, 2006); Ben Griffin, *The Politics of Gender in Victorian Britain: Masculinity, Political Culture and the Struggle for Women's Rights* (Cambridge, UK: Cambridge University Press, 2012); John Tosh, *A Man's Place: Masculinity and the Middle-Class Home in Victorian England* (New Haven, CT: Yale University Press, 1999).
- 81 *Montreal Gazette* (14 June 1847).
- 82 For an extended and wide-ranging discussion of how liberalism shaped mid-nineteenth-century municipal governance, see Joyce.
- 83 An interesting discussion of this in the context of the typhus epidemic that struck New York City in 1892 can be found in Markel.
- 84 For another example of commercial interests opposing quarantine, see Dorceta Taylor, *The Environment and the People in American Cities, 1600s–1900s: Disorder, Inequality and Social Change* (Durham, NC: Duke University Press, 2009), 107.
- 85 See McKay, "Canada as a Long Liberal Revolution"; Fecteau, *Un nouvel ordre des choses* and *La liberté du pauvre*.
- 86 *La Minerve* (19 August 1847).
- 87 Ibid.
- 88 For more on how Montreal's civic élites confronted epidemics in later decades that makes this argument about earlier outbreaks, see Bruce Curtis, "Social Investment in Medical Forms: The 1866 Cholera Scare and Beyond," *Canadian Historical Review* 81, no. 3 (September 2000): 347–79.
- 89 Martin Pâquet traces the relationship between public health and efforts to regulate migration prior to the 1840s. See "Diminuer le danger par de bons règlements intérieurs: État colonial et contrôle médical des migrations au Bas-Canada et au Canada-Uni, 1795-1854." *Canadian Bulletin of Medical History / Bulletin canadien d'histoire médicale* 16 (1999): 271-291.
- 90 See Robert Gagnon, *Questions d'égouts: Santé publique, infrastructures et urbanisation à Montréal au XIX^e siècle* (Montréal: Boréal, 2006).
- 91 See Pâquet and Chilton.
- 92 For a detailed account of the debates surrounding responsible government, see Phillip Buckner, *The Transition to Responsible Government: British Policy in British North America, 1815–1850* (Westport, CT: Greenwood Press, 1985).
- 93 This argument was made forcefully by Adam Ferrie in his open letter to Earl Grey at the colonial office. See Adam Ferrie, *Letter to the Rt. Hon. Earl Grey, Embracing a Statement of Facts in Relation to Emigration to Canada during the Summer of 1847* (Montréal: The Pilot, 1847).