

Scapegoat!  
Foreigners and Disease in the Nineteenth Century  
Industrial  
Black Country.  
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Please Note:

This article contains historical language which is considered offensive today.

During national epidemics and international pandemics, there has been a constant albeit unfortunate consequence: the search - or even a need - for a scapegoat to blame, frequently a minority or immigrant group. To Ginzburg (1990): *the prodigious trauma of great pestilences intensified the search for a scapegoat on which fears, hatreds and tension of all kind could be discharged* (p.124). To Nelkin and Gilman (1988): *Blaming has always been a means to make mysterious and devastating diseases comprehensible and therefore possibly controllable* (p.377).

During the Black Death (1347–1351) violence was unleashed upon Jewish people across Europe: men, women and children were eradicated - locked in synagogues or rounded up and burnt or drowned (Cohn 2012).

With the appearance of syphilis in Europe during the fifteenth century rival nations blamed each other as the originators of the disease. This is evident by the range of alternative names: the French called it the *Neapolitan disease*, the *disease of Naples*, the *Spanish disease* or the *Castilian sickness*; the English and Italians: the *French disease*, the *Gallic disease*, the *French evil*, the *Morbus Gallicus* or the *French pox*; the Germans: the *French evil*; the Russians: the *Polish disease*; the Polish and the Persians: the *Turkish disease*; the Turkish: the *Christian disease*, the Tahitians: the *British disease*; India: the *Portuguese disease*; in Japan: the *Chinese pox*, the *Chinese Ulcer* or the *Canton Rash* and the *Persian fire* (Clough 1993; Frith 2012; Rothschild, 2005).

During the twentieth century homosexual men were the focus of blame for Human Immunodeficiency Virus (HIV) and Acquired Immune Deficiency Syndrome (AIDS) (Cohn 2012).

The heavy industrialised areas of Staffordshire and Worcestershire, known collectively as the Black Country<sup>1</sup> (today comprising the boroughs of Dudley, Sandwell, Wolverhampton and Walsall) were not immune to this, especially during the nineteenth century when dire living conditions were the norm for the majority of the area's population and contributed to the spread of disease.

One group in particular who were forced to endure not only these conditions but also loathing as the carriers of Typhus, were the Irish.

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<sup>1</sup> It was termed the "Black Country" due to the layer of soot which covered the area.

Typhus (caused by the bacteria *Rickettsia prowazekii*) is carried in the faeces of body lice (*Pediculus humanus*) which live and breed in dirty clothing and bedding. Humans become infected when bite wounds of the lice are scratched and the faeces enters the wounds; by inhaling or ingesting the dried louse faeces or by rubbing the faeces into the eye (Cowan 2016). Thus victims do not necessarily have to be poor or lousy to contract it: doctors and nurses engaged in its treatment were at high risk. The symptoms occur frequently soon after infection: a severe headache and fever; a rash of dark spots appearing on the chest and spreading to the arms, hands, legs and feet; coughing; severe muscular pain; stupor; delirium and sensitivity to light. It can lead to blood vessels blockages and death (Cowan 2016).

A major Typhus epidemic occurred during the Great Irish Potato Famine (1845-1850) and it was carried to England by Irish immigrants, becoming known as *Irish Fever* (Cowan 2016). Those who arrived in the Black Country inhabited the poorest areas, such as Caribee Island in Wolverhampton. *The Birmingham Daily Post*, June 4<sup>th</sup> 1866, described the area:

*With Caribee Island ... the evil condition of the place arises largely from construction. It is a labyrinth of narrow tortuous courts in which every scrap of space has been built upon. There is no single passage through it for the free circulation of air: its alleys are as intricate as the wards of some gigantic key. Even where there has been a spare corner for ash heap, privy, or what not, some wretched building has been run-up and let out for a small consideration weekly. Some of the houses have one room upstairs as well as one down – each room being six or seven feet square - the upper one reached by a kind of ladder, often out of repair, underneath which is the pantry of the establishment. Others have one floor only, and that not partitioned, excepting by a curtain. In one place a couple of houses have come down, and the space has been used as a refuse heap, urinal and filth receptacle generally for two or three courts. Here the drains are ill made and out of repair, while the house are damp and odorous with the urinary deposits near them. The rent for these buildings ranges from two to four shillings a week.*

And of the people inhabiting it? John Mouchet Baynham, a surgeon of Birmingham observed:

*The Irish ... are the very pests of society. They generate contagion, more and worse cases of fever, and other infectious diseases of a spontaneous origin, occur among them, and the acute diseases of which they become the subjects are fatal in a much larger proportion, than among the English; they are chiefly liable to fever. The reason of this fatality is not the poverty of the subject, but the want of ventilation and cleanliness of person. ... they are never washed, so that their skin becomes coated with filth. (Selection of Reports and Papers 1836).*

Police Constable Henry Smitheman of Dudley described the Irish inhabitants of lodging houses as “dirty” (p.39 Lee 1852) – but it should be noted that he also reported there were “black” inhabitants (p.39 Lee 1852) but no vehemence was attached. This may be due to the fact that there was no mass immigration into the area by Afro-Caribbean or Asian people until the mid-twentieth century.

The sentiment that the inhabitants were to blame for the conditions they were living in is undisguised. These living conditions were common across the many slum areas of the Black Country as was Typhus. In 1871 Dudley suffered another outbreak. In a report on the outbreak, it was observed:

*[Typhus] is a constant cause of disease and death in Dudley: at the time of my inspection typhus was epidemic and many well-marked cases were seen, which presented the ordinary characteristic rash and symptoms. It was impossible to form an accurate estimate of the number of persons who have recently been attacked, but throughout the borough there have been since July last at least 500 cases of "fever" one medical officer alone have attended 300 cases, of which the majority were typhus, fresh cases, and these exclusively of the same type, were ascertained to be daily occurring, whole households being attacked. The chief conditions under which typhus is known to prevail and to spread are, over-crowding, destitution, and filth... It is among the poor and those residing in the worst parts of Dudley that the disease has mainly prevailed... one woman was found in a room, the only article of furniture in which consisted of a rickety wooden bedstead, across which was stretched a piece of sacking; on this she lay dying, being covered only by a few dirty tattered clothes and rags. Many of the patients shared their wretched beds, which in several instances, consisted in a heap of shavings full of vermin with others who had not yet succumbed (p.7, Thorne 1871).*

In 1832 and 1848 the towns and villages of the Black Country were severely hit by Cholera<sup>2</sup>, the spread of the disease exacerbated by the poor living conditions.

The Cholera bacterium *Vibrio Cholerae* is transmitted by drinking infected water; consuming food infected by tainted water; via contact with items tainted by victims' faeces (bedding and clothing) and by insects and mice and rats. Once infected, the victim experiences violent diarrhoea (producing between ten and twenty litres a day), cramps and vomiting; this leads to rapid – and severe – dehydration. As blood pressure drops, leading to hypotension, the blood thickens and circulation is inhibited, depriving the organs of oxygen resulting in cyanosis (a blue hue to victims' skin). Death can occur within a few hours of becoming ill (Harris et al 2012; Thomas 2015).

While the first major outbreak in the Black Country occurred in Tipton during the first week of July 1832, isolated cases first appeared in Dudley in March 1832 among a group of travelling German broom-sellers living in an overcrowded lodging house in Queens Cross. Two males: a thirty year old and a sixteen year old died, but a girl recovered and survived.

John Roberts, a Surgeon, made his report to the Central Board of Health, which also appeared in *The Wolverhampton Chronicle* (4<sup>th</sup> April 1832):

*Dudley, March 31, 1832.*

*Sir: - I consider it my duty to inform you that we had within the last few days in this town, three decided cases of Cholera Asphyxis, two of which have proved fatal.*

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<sup>2</sup> Known as *Asiatic Cholera*, having originated in the Ganges Delta in India, it was also known as *Spasmodic Cholera*; *Epidemic Cholera*; *Cholera Asphyxia*, *Cholera Asphyxis* and *Cholera Morbus*.

*The disease appeared among a number of poor itinerant Germans, who were found congregated in a filthy densely crowded lodging house. The survivors have been removed from the town, and from the strict precautionary measures which have been adopted, we hope the frightful malady will make no further progress.*

*I remain, Sir,  
Yr, very obt, servant  
John Roberts.*

However fear of foreigners could also be exploited and this occurred - somewhat ironically - as a result of attempts to curtail the spread of Smallpox.

Before its eradication Smallpox was one of the biggest killers in history. The Smallpox Variola Virus was transmitted via direct contact with an infected person or objects (including bedding and clothing) or through airborne droplets from coughing and sneezing. The symptoms began with fever, bodily aches and a feeling of general malaise. A rash appeared in the mouth and throat, then on the skin spreading from the face to the body. The rash developed into raised fluid filled pustules, which crusted over to form scabs. A person was infectious until the scabs were gone. These pustules eventually become pitted scars or *pock marks* on the survivor's skin resulting in severe scarring. While fatality rates could be up to thirty percent, strains such as Malignant and Haemorrhagic were always fatal (Hopkins 2002).

Following the success of Edward Jenner's vaccination (Jenner 1796), a number of Vaccination acts were passed by the government between 1840 and 1867 which made vaccination compulsory up to the age of 14 (Williams 1994). However, these acts produced a great deal of anti-vaccination feeling, which in some towns – such as Leicester in 1865 - lead to riots. This stemmed from the parents' belief that it was their right to decide what was best for their children and overriding the views of parents was an infringement of peoples' liberties and their right to choose, (Durbach 2013). A great deal of misinformation was also spread by the Anti-Vaccination movement which claimed that vaccinations were no protection against Smallpox; spread Syphilis and other diseases and were a direct cause of injury and death (Durbach 2004).

In early 1881, as a Smallpox epidemic raged in London, a vaccination scare began in Derbyshire. Rumours – possibly started by the anti-vaccination league – circulated that foreigners, *American black doctors* or *negro doctors*, were being sent by Prime Minister William Gladstone to vaccinate all the children attending state schools (Durbach 2004). By May the rumours had reached the Black Country. On Saturday 14<sup>th</sup> May 1881 *The Dudley and District News* carried the following story:

#### *VACCINATION SCARE AT DUDLEY*

*An extraordinary rumour reached Dudley on Thursday that “three black doctors” who had been to Tipton and Lower Gornal would arrive at the Board schools in the afternoon for the purpose of vaccinating the children. How this canard arose it is impossible to say, but it travelled from Gornal to Dudley, and created almost a great a furore here as it did there. It is true that at Gornal, the infuriated crowd smashed*

*the windows of the school, and they were on the point of doing the same at Dudley. At Wolverhampton Street Board Schools a crowd of women, armed with pike helms, pokers and chair legs, made a hostile demonstration, and, although assured by Mr. Woodhouse, the schoolmaster, that no one would be allowed to interfere with the children, and that he had heard nothing of the "American blacks", they continued their threatening attitude, and refused to give the slightest heed to what he said. As a consequence the school had to be dismissed, which after all, was the simplest plan, for it convinced them of the absurdity of the report. At Stafford Street Board Schools, too, a similar crowd assembled, and gave free expression to their threats if their children were interfered with. Several hundreds of men, women and children gave a willing ear to all manner of ridiculous rumours, believing that a number of children had died in Gornal as a result of the vaccination, that the schools presented a shocking sight, and that some of the teachers had fainted at what they saw. These and equally foolish reports were eagerly swallowed by the excited crowd, who were pacified only when the children left school. Tettenhall Street School had to be closed owing to a similar rumour, and the school attendance throughout the borough was materially affected by it. The scenes were renewed at several of the schools in the course of yesterday, and also at Coseley, Bilston, and other parts of the outlying district.*

To the *County Express* (14<sup>th</sup> May 1881) opinions of the protestors included:

*"...as to whether the professional gentlemen, who were to perform the process of vaccination, were American or Zulus ... Other persons who were evidently well-informed on the matter had discovered that the place where the lymph was to be injected was behind the right ear ... one or two affirmed that they had seen children who had undergone inoculation..."*

On the same day similar scenes occurred at schools at Brockmoor, Bank Street and Hill Street, Brierley Hill, where the parents refused to send their children to school for their afternoon lessons or for Monday lessons.

*The Western Daily Press* (Thursday 19<sup>th</sup> May 1881) reported that at a meeting of the Sedgley School Board parents had:

*"...rushed into the schools, burst the doors open, and seized their children, many of whom were injured by being knocked down when effecting their escape from the schools, Three schools were now closed".*

On 19<sup>th</sup> May the West Bromwich School Board issued notices refuting the rumours reminding parents that if they kept their children away from school they would be liable to prosecution (*The Lichfield Mercury* Friday 20<sup>th</sup> May 1881), but there were problems on the horizon:

#### *VACCINATION SCARE*

*Shortly after nine o'clock on Friday morning [20<sup>th</sup> May] it was rumoured in West Bromwich that the Government had issued an order ordering children in all elementary schools to be revaccinated, as the result of the alarming spread of smallpox in London. It was also stated that a number of "black doctors" had arrived in the town commissioned by the Government to perform the operations. Soon after*

*the schools of the district had been opened a crowd of about 500 men and women surrounded the Ebenezer Board Schools, and demanded that the children should be immediately released, some stating that they would lynch the "black doctors" should they attempt to vaccinate their children. At the same time a similar scene was being enacted at Greet's Green Board Schools, where a still larger crowd had congregated, and were menacing the teachers. The doors were secured to prevent the entrance of the mob, upon which a number of women surrounded each of the windows and shook their fists at those inside, at the same time threatening them with violence should they detain their children for the "black doctors". Several windows were smashed. In the afternoon the rumour reached the upper part of West Bromwich, and Mayer's Green Board Schools were besieged with angry parents demanding their children. It was stated in the crowd that six "black doctors" had been seen to enter the approach to the schools, and stimulated by this extraordinary assertion, about fifty women ran up the entrance to the schools and demanded their children. The school doors were made fast, and Mr. Perkins, master of the Queen-Street Boys' School was sent for. When the messenger arrived at Queen-street a very similar scene presented itself. The schools were surrounded by three hundred men and women, who asked that their children might be sent home. Unable to satisfy the mob, Mr. Perkins cleared the schools. Upon reaching Mayers' Green Schools Mr. Perkins found that the parents assembled had become so exasperated at the statements which were rife concerning the six "black doctors" that they had forced their way into the schools and were carrying off their screaming children. Several women fainted and for two hours considerable disturbance prevailed at most of the schools in the town and district. A large crowd also surrounded Christ Church Schools.*

*On Friday afternoon intense excitement existed in Wednesbury owing to a rumour being afloat that the "black doctors" had arrived in the town and proposed visiting the schools in order to vaccinate the children. Some of the parents believing the rumour, which rapidly spread, proceeded to the schools and demanded that their children should be given up to them, they at the same time remarking that they objected to have their offspring "cut to pieces by black men, Mr. Gladstone, or anyone else". Although they were informed that their children were in no danger, they were incredulous enough to believe that they were, and the excitement ultimately became so great that it was found necessary at the principal schools to dismiss the children and close the schools for the day.*

*At Dudley, Holly Hall, and Tipton on Friday, the vaccination scare continued. The schools were again surrounded by angry crowds of parents, who threatened violence if their children were interfered with by "the blacks". The greatest mischief in connection with the matter was that the examinations were just on, and it has spoiled the chances of good Government grants. (The Worcester Journal Saturday 21<sup>st</sup> May 1881)*

The papers dismissed these claims as hoaxes and having no foundations while noting the want of intelligence displayed by the parents. *The Dudley and District News* (14<sup>th</sup> May 1881), however, gave vent to its spleen:

*The whole thing is so ridiculously absurd that one could scarcely give it credence had it not actually taken place. How in the name of common sense people swallowed such tales is a riddle, and yet working men, some of whom might in other circumstances have been deemed intelligent, were heard to declare that there must be something in it, for so-and-so had told them, and they could depend upon what he*

*said, forgetting that their informant had been simply engaged in circulating the unfounded reports. Some individuals must evidently have been at work drawing upon their imaginations for their facts, for scenes of a nature calculated to inflame ignorant people were described as taking place, and these descriptions were believed as readily as though they had been official bulletins issued from time to time to inform the public of the state of some illustrious patient. We were certainly not prepared for such a state of things in Dudley or elsewhere, but after witnessing the credulity manifested on Thursday we are readily to exclaim, with the individual who had been listening to some extraordinary statement "Efter that, ony thing."*

Without a doubt, highlighting the Doctors as "Black" and "American" exacerbated the situation.

Sadly, as has been demonstrated, blaming outsiders for outbreaks of disease is a recurring theme throughout history. It can be argued that in the past these occurrences resulted from a lack of understanding regarding how diseases emerge and spread. However, in the present day it is common knowledge that diseases are caused by pathogens and the myriad ways by which they spread and that strangers are not the sole cause. Or is it? *The Express and Star* 27<sup>th</sup> March 2020 carried the following article:

*Chinese people living in the West Midlands have been targeted over corona virus.*

A reflection of what has been happening internationally; these are responses to the pandemic caused by the strain of Corona Virus known as Covid-19, which originated in the wet markets of Wuhan in China where live meat and fish are sold (Shereen et al 2020).

It could be posited that targeting members of particular groups is a way of relieving the frustration felt by those disempowered by the threat of a disease, or, it is sadly, a good example of Jean-Baptiste Alphonse Karr's observation: "*The more things change, the more they continue to be the same thing*".

Clough, C.H. (1993) The Discovery of America, the Italian Wars, and the Impact of Syphilis on Western Christendom. *Medical Historian*, 6, 17-52

Cohn, S.K. (2012) Pandemics: waves of disease, waves of hate from the Plague of Athens to A.I.D.S. *Historical Research*, 85(230) 535-555

Ginzburg, C. (1990) Deciphering the Sabbath, in B. Ankarloo and G. Henningsen (ed.) *Early Modern European Witchcraft: Centres and Peripheries*, Oxford University Press.

Cowan, G. (2016) *The Most Fatal Distemper: Typhus in History*. Diadem Books.

Durbach, N. (2004) *Bodily Matters: The Anti-Vaccination Movement in England, 1853–1907*. Duke University Press

-- (2013) Class, Gender, and the Conscientious Objector to Vaccination, 1898-1907', *The Journal of British Studies*, 2013, 41, 58-83.

Frith, J (2012) Syphilis - Its Early History and Treatment until Penicillin, and the Debate on its Origins. *Journal of Military and Veterans' Health* 20(4). 49-58.

Harris, J.B; La Rocque, R.C. , Qadri F; Ryan, E.Y. , Calderwood, S.B,(2012) Cholera. *The Lancet*, 379, June 30, 2466-2476

Hopkins, Donald R. (2002). *The Greatest Killer. Smallpox in History*. University of Chicago Press.

Jenner, E (1798) *An Inquiry into the Causes and Effects of the Variolae Vaccinae, a disease discovered in some of the western counties of England, particularly Gloucestershire and Known by the Name of Cow Pox*

Lee, W. (1852) Report To The General Board Of Health On A Preliminary Inquiry Into The Sewerage, Drainage And Supply Of Water, And The Sanitary Condition Of The Inhabitants Of The Parish Of Dudley In The County Of Worcester. Public Health Act (11 And 12 Vict.Cap.63). London.

Nelkin, D. and Gilman, S. L. (1988) Placing blame for devastating disease, *Social Research*, 1, 362–78;

Rothschild, B.M. (2005) History of Syphilis. *Clinical Infectious Diseases* 40:1454–63.

*Selection of Reports and Papers of the House of Commons: Irish poor, Volume 48* (1836)

Shereen, M.A.,; Khan, S.; Kazmi, A; Bashir, N. and Siddique, R. (2020) COVID-19 infection: Origin, transmission, and characteristics of human corona viruses. *Journal of Advanced Research*, 24, July, 91-98.

Thomas, A.J. (2015) *Cholera: The Victorian Plague*: Yorkshire: Pen and Sword History.

Thorne Thorne, R (1871) *Report on a Prevalence of Typhus at Dudley, and on the Sanitary Condition of the Borough by Dr. Thorne Thorne.* .

Williams, N. (1994) The Implementation of Compulsory Health Legislation: Infant Smallpox Vaccination in England and Wales, 1840-1890', *Journal of Historical Geography*, 20: 4.