

Jefferson Quick, Timely Reads

COVID-19 Pandemic is a Teachable Moment on Native American History

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About a month after their arrival at Cape Cod Bay, the Pilgrims decided on a location for Plymouth Plantation. An important advantage of the site they chose was that it had been cleared of trees, yet no Native Americans lived there. Only four years earlier, however, the land that would become Plymouth was home to a thriving village of at least one thousand Native people. But that was before the virus. From 1616 to 1619, a disease epidemic raged among Native American people on the Atlantic coast. Seventy-five percent the Cape Cod villagers died. The survivors abandoned their homes. When the Pilgrims came across the vacated site shortly before Christmas 1620, they found “skulls and bones ... in many places lying above the ground.” The Pilgrims considered themselves to be the beneficiaries of a “miraculous gift from God.” (N. Philbrick, *Mayflower*, 2006, pp. 78-80).

Viruses have been shaping American history since Europeans began traveling regularly to North America five centuries ago. Epidemics of the virus-based diseases that Europeans brought with them devastated the people already living here. Native American people died by the millions. The COVID-19 pandemic of 2019-2020 perhaps is an appropriate “teachable moment” on the disastrous impact that America’s Colonial Era epidemics had on Native Americans.

The loss of life that Native people suffered from Colonial Era epidemics is hard to fathom. One historian estimates that more than two million indigenous people lived in North America, east of the Mississippi River, in 1492. By 1750, there were fewer than 250,000. That’s a population decline of almost 90 percent. Disease was the dominant factor in that population loss and epidemics of viruses were the greatest killers of indigenous Americans during the Colonial Era. (D. Richter, *Facing East from Indian*

Country, 2001, pp. 7, 258; A. Crosby, "Virgin Soil Epidemics," *The William and Mary Quarterly*, 1976, p. 289).

Smallpox, measles, chicken pox, and other virus-based diseases common in 17th and 18th century Europe, were unwittingly carried to North America by European explorers, traders, and settlers. The viruses and the diseases they caused were largely unknown in pre-Columbian North America, whose people had been isolated from Europeans for more than 10,000 years. The epidemics among Native people that resulted are called "virgin soil epidemics," that is, epidemics within populations that previously had no contact with the virus and "therefore [were] seemingly immunologically almost defenseless." (Crosby, p. 289; Richter, pp. 34-35).

The epidemics that whipsawed across Native American communities during the Colonial Era are far too numerous to list. One example is the previously mentioned 1616-1619 epidemic that swept coastal New England from Maine to Cape Cod and destroyed the Native village that preceded Plymouth. In 1738, a smallpox epidemic killed half of the Cherokee nation. Slightly less than half of the Catawba people perished in a 1759 smallpox outbreak. Closer to modern western Pennsylvania, smallpox surged through indigenous communities around the Great Lakes and along the St. Lawrence River in the 1630s and 1640s, epidemics that killed one-half of the people of the five nations of the Iroquois (Haudenosaunee) League and a similar percentage of Huron people. Near the Ohio River and its tributaries, 17th and 18th century epidemics of smallpox, measles, influenza, and other viruses made western Pennsylvania "a dangerous place." Mortality rates in those epidemics, at times, exceeded 75 percent. (Crosby, p. 290; Richter, p. 60; C. Calloway, *The Shawnees and the War for America*, 2007, pp. 6-7).

There is a temptation to conclude that the viruses were so devastating among Native American people solely because they had "no immunity" to them. That, however, overly simplifies a complex set of causative factors and might give rise to erroneous propositions, such as: (1) the enormous loss of Native lives was inevitable after European contact, and (2) European colonialism and colonial policies were not significant contributing causes of one of history's great public health disasters. Suffice it to say that, although to a large degree the Native epidemics of the Colonial Era are attributable to the Natives' lack of "adaptive immunity" (immunity derived, for example, from successfully battling a virus at a young age), environmental and other factors that were byproducts of European colonialism contributed materially to the catastrophic loss of life. Physical, social, economic, and political circumstances all combined to weaken Native Americans' ability (individually and as communities) to fight the epidemics. "No immunity" is but one of many causes of the tragic epidemics that devastated Native populations during the Colonial Era. (D. Jones, "Virgin Soils Revisited," *The William and Mary Quarterly*, 2003).

Population loss numbers and death toll percentages, as profoundly sad as they are, do not begin to describe the human suffering endured by the Native disease victims, their

families, and their communities. Writing about a smallpox epidemic that struck a nearby Native community, Plymouth Governor and Mayflower passenger William Bradford wrote that the victims “died most miserably; for a sorer disease cannot befall them, they fear it more than the plague. ... The condition of this people was so lamentable and they fell down so generally of this disease as they were in the end not able to help one another, no not to make a fire, nor to fetch a little water to drink, nor any to bury the dead.” (William Bradford, quoted in Richter at p. 61).

Historian James Merrill described a likely reaction of 17th and 18th century Native people “when a strange malady struck their community.” (J. Merrell, *The Indians’ New World*, 1989 at p. 19):

Perhaps rumors of sickness elsewhere reached the village, brought by people themselves who could be carrying the virus. ... Concern became fear when someone in the village sickened, suffered, and died; fear turned to terror as others followed the same path to the grave. Perhaps the healthy tended to the sick, doing what they could to relieve the pain. Perhaps they simply fled to the woods or to other settlements, spreading the word – and the infection – still farther. ... Meanwhile, the community came to a standstill. Water was not drawn, fires were not tended, deer were not hunted, [and] weapons were not repaired. Crops were not planted, or if planted not weeded, or if weeded not harvested. Nothing stirred. Death reigned.

The epidemics destroyed many Native communities, such as the one that sat on the Plymouth site. Of the communities that survived, some remained viable units but others were unable to function on an ongoing basis. Some dislocated Natives were accepted into the surviving communities. In other cases, new communities were formed among former neighbors and sometimes among former rivals. The process was often very difficult, in part because Native groups found themselves in sharp competition with others for increasingly scarce resources. Wars among groups increased, including “mourning wars,” that is, wars undertaken with the explicit objective of taking captives, some of whom would be adopted by the victors into their nation and thus help them to replenish their dwindling population. Mourning wars had been waged long before the 17th and 18th century epidemics, notably by Iroquois nations, but the frequency and ferocity of those wars multiplied in the wake of the severe dislocation in Native communities caused by the epidemics. (Richter, pp. 61-67).

Some characteristic aspects of the Native American epidemics of the Colonial Era are of particular interest when compared with the current Coronavirus pandemic. The Colonial Era viral epidemics, especially smallpox, tended to hit Native people the hardest who were between the ages of 15 and 40, people whose fully developed immune systems produced a violent reaction to the previously unknown virus such that the victim’s body, in a sense, turned against itself. By contrast, on April 15, 2020, the Pennsylvania Health Department reported that people between the ages of 13 and 49 represented less than half of the confirmed Pennsylvania COVID-19 cases and only 20 percent of hospitalized COVID-19 patients. Unlike the 17th and 18th century viral

diseases, COVID-19 appears to hit more severely those aged 50 and up (they are 80 percent of the hospitalized patients in Pennsylvania) whose immune systems can be expected to be less effective than those of people of younger ages, due to the effects of normal aging. (Richter, pp. 60-61; health.pa.gov, “COVID-19 Data for Pennsylvania,” accessed April 15, 2020).

In part because the Colonial Era epidemics hit so severely at Native adults aged 15 to 40, those in the prime of their working lives, productive work was brought to a standstill during the Colonial Era epidemics. As Professor Merrill noted, quoted above, “Water was not drawn, fires were not tended, deer were not hunted, [and] weapons were not repaired. ... Nothing stirred.” Historian Daniel Richter made a similar comment, observing that “the everyday work of raising crops, gathering wild plants, fetching water and firewood, hunting meat, and harvesting fish virtually ceased.” Governor Tom Wolf’s COVID-19 emergency “stay at home” order, which prohibits most normal business activities, offers an eerie parallel to the economic inactivity during the Native American epidemics of the Colonial Era. (Merrill, pp. 19-20; Richter, p. 60-61; “Order of the Governor of the Commonwealth of Pennsylvania for Individuals to Stay at Home,” April 1, 2020).

In many instances, Colonial Era Native Americans’ cultural practices and healing rituals exacerbated the spread of a virus. When Native villagers crowded around an infected neighbor in a traditional communal healing ritual, they hastened the spread of the virus throughout the village. Environmental historian Alfred Crosby wrote, in his seminal article *Virgin Soil Epidemics*, that initially Native people “had no conception of contagion and did not practice quarantining of the sick ... until taught to do so by successive disasters.” As time wore on, some Native people began to practice a form of what today would be called “social distancing,” as reflected in a 1763 report that some Ohio Indian people who had displayed smallpox symptoms “were immediately moved out of town and put under the care of one who had had the disease before.” The contrast between Colonial Era communal healing rituals and COVID-19 social distancing practices is stark. But the 18th century report of isolating the sick from the village and having them cared for by a person who had survived an earlier epidemic finds a clear parallel in today’s headlines, including the search for an “antibody test” that might identify those who have recovered from COVID-19 and thereby have sufficient immunity to, for example, safely care for the ill. (Crosby, pp. 296-297; M. McConnell, *A Country Between*, 1992, pp. 195-196; Washington Post, “Coronavirus Immunity Remains Big Question Mark for a Country Eager to Reopen,” April 15, 2020).

As a post-script, it is important to reiterate that the explorers, traders, and settlers who brought viral European diseases with them to the Americas did so unwittingly. The leading historians of the Colonial Era do not suggest otherwise. However, those historians have noted specific instances in which Europeans attempted to use viruses as a weapon against Native Americans in an 18th century form of what today would be called biological warfare. Western Pennsylvania is at the center of a well-documented

attempt to use smallpox against Native people during the conflict between the British Empire and coalitions of Native American nations called Pontiac's War. (McConnell, pp. 185-197).

In May 1763, an Ottawa leader named Pontiac and warriors from several Native nations launched a siege of the British fort at Detroit. Shortly after that, another coalition of warriors, mainly "Ohio Indians" who lived in western Pennsylvania, joined the war against the British. They attacked British outposts across the region. In June 1763, they captured the British forts at Presque Isle (in Erie), LeBoeuf (Waterford), and Venango (Franklin). The only western Pennsylvania fort that remained under British control was Fort Pitt (Pittsburgh). Native warriors freely raided colonial settlements across western Pennsylvania. Most of the settlers who weren't killed in the raids fled, many to the east side of the Allegheny Mountains and some to the relative safety of Fort Pitt. In early summer 1763, Pontiac's War was going badly for the British. (McConnell, pp. 184-190).

At the end of June, Ohio Indians began a siege of Fort Pitt. Shortly before that, on June 24, 1763, their leaders negotiated with Fort Pitt's commander, Simeon Ecuyer, offering him an opportunity to surrender the fort without bloodshed, in exchange for a promise of safe passage across the mountains for Ecuyer, his troops, and the settlers. Ecuyer declined. The conference was conducted pursuant to established protocol for negotiations between Europeans and Native Americans, which included a ceremonial exchange of gifts. British records of the negotiations indicate that, "Out of our regard to [the Native Americans]" the British "gifts" included "two blankets and a handkerchief out of the smallpox hospital." A British frontier trader who was present at Fort Pitt expressed the hope that the disease infested items "will have the desired effect." (McConnell, pp. 194-195).

Ecuyer's attempt to use smallpox contaminated blankets as a form of biological warfare was not an idea unique to him, or one borne solely out of the desperation of his situation. To the contrary, in 1763 the use of smallpox as a weapon against Native Americans was agreed upon at the highest levels of the British chain of command in North America. In mid-1763, Sir Jeffrey Amherst was the British commander in chief in North America. He sent Colonel Henry Bouquet with British troops to the west that summer to relieve the siege of Fort Pitt. In a memorandum that Amherst sent to Bouquet and other officers within days after the June 24 Fort Pitt negotiations, Amherst asked whether it might be "contrived to Send the Small Pox among those Disaffected Tribes since, We must use Every Stratagem in our power to Reduce them." Amherst's memo went on to say that "the Indians might be infected by giving them blankets from military hospitals," which might permit the British to "Extirpate this ... Race." For his part, Bouquet promised that, if the opportunity is presented to him, "I will try to inoculate the [Natives] with Some Blankets, [but I will] take Care not to get the disease." (McConnell, pp. 194-195).

The British effort to use smallpox as a weapon against Ohio Indians in 1763 might not have been necessary (there is evidence that smallpox was already circulating among Ohio Indians before the June 24 “gifts” were delivered) or particularly effective (there are indications that by 1763 some Ohio Indians had learned to reduce the impact of smallpox by quarantining victims of the disease). Nevertheless, there is little question that Amherst and Bouquet were in favor of using smallpox as a biological weapon against Ohio Indians and that Ecuyer tried to do exactly that. (McConnell, p. 195).

“Teachable moments” are unplanned, unexpected events that provide an opportunity for an insightful detour from a main topic. On New Year’s Day 2020, few could have conceived the extent to which or how quickly the world’s attention would focus on coronavirus and the efforts to “flatten the curve” of COVID-19 infections. COVID-19, the sickness and death it has caused, the hardships being endured by so many across the world, and the efforts to control the pandemic are and for quite some time will remain the main topics. The COVID-19 pandemic, however, has created teachable moments on a wide variety of subjects, including the epidemics of the past. In the midst of the current pandemic, it is worth recalling that epidemics have been shaping American history since Columbus and that, during America’s Colonial Era, viruses that were brought to America by Europeans had tragic and devastating consequences for the people who were already living here, Native Americans.

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