

**Castle Pox:
The Battle over Public Health in Marblehead, Massachusetts, 1773-74**

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A Note:

I began this thesis almost year ago when epidemics and quarantine were purely academic interests. By the time of its conclusion, however, a pandemic has gripped the world, providing new and personal insights into this world of smallpox outbreaks. While I wish my work was slightly less relevant, I have been reminded of the importance of studying the history of public health and recognizing its origins in our nation.

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Introduction

By the road to the contagious hospital
under the surge of the blue
mottled clouds driven from the
northeast—a cold wind. Beyond, the
waste of broad, muddy fields
brown with dried weeds, standing and fallen

—William Carlos Williams, “Spring and All,” 1923

In 1793, the Philadelphia physician Benjamin Rush declared that in America, “the people rule here in medicine as well as government.”¹ Twenty years earlier, however, a battle raged in Massachusetts over whether this would be true. In October 1773, a private inoculation hospital—known as Essex Hospital, or Castle Pox—in Marblehead, Massachusetts sparked controversy amongst its potential beneficiaries. The four wealthy proprietors, all of whom would become important figures in the American Revolution, fought with the local townspeople, primarily fishermen, over its existence, exclusivity, and regulation. For the next six months, Marbleheaders engaged in a series of riots, violent protests, and acts of vigilante justice—including the stealing of small-pox infected clothes, the purposeful infection of an entire town, the burning of a hospital with its overseers still inside, and the destruction of a neighboring jail to free fellow rioters.

Through these acts, the protestors hoped to assert control over the hospital. The campaign against the patients, the doctor, and the owners aimed to protect the town’s public health, needing to disturb the peace to ensure safety. Ironically, the proprietors believed they were doing the same thing. This paradox underscored how health crises shaped the colonists’ differing understandings of both health and democracy—and the ways in which they informed one another.

¹ Lyman Henry Butterfield, *Letters of Benjamin Rush: Volume II: 1793-1813* (Princeton University Press, 2019), 687.

This thesis frames the riots against Castle Pox alongside the development of Marblehead and the transformation of colonial health care. Distinct political and economic change took place in the seventeenth and eighteenth centuries as Marblehead developed from a fishing port to a dominant power in the Atlantic fishing and shipping trade. Essex Hospital, as a private venture aimed at promoting the town's welfare, was part of a larger trend of institutional change that occurred with the influx of wealth and the emergence of a gentry class. In her analysis of Marblehead's history, the historian Christine Heyrman asserted that economic success in Marblehead caused increased social stability and religious sentiment. Importantly, however, the riots against Castle Pox disrupted this narrative of colonial progress. The resulting volatility revealed the lasting tensions within the community as Marbleheaders confronted questions about what constituted the public good. The contradicting answers from each of the town's factions are perhaps best highlighted by the project's two names—Essex Hospital and Castle Pox, the former being the official, benevolent title and the latter satirically coined by a local sailor and diarist to mock the venture.

By focusing on the personnel of the hospital including its owners, patients, and doctor, I hope to emphasize the way medical practice was used as a proxy for town improvement. Smallpox had long threatened colonial populations, and inoculation was an effective tool in building up communal immunity. Those who were inoculated were still infectious, however, and needed to be carefully isolated and quarantined. A recently inoculated patient could easily spread the disease to those who had never been exposed. Inoculation hospitals, therefore, could lead to significant improvements in public health, but they also were poised to spark an epidemic. Marblehead's Essex Hospital was one of the first for-profit medical practices in the colonies, created not by medical practitioners but by wealthy merchants and founded in a town riven by economic

stratification. This private venture had the potential to endanger the majority of the town while protecting only those who could afford the variably expensive procedure. At the same time, the hospital—if operated effectively, either by its owners or the town—could protect against future epidemics. The riots began in response to two intertwined concerns: the hospital largely served wealthy outsiders rather than locals, and these patients continually broke quarantine.

The months of the Castle Pox riots were complicated by political unrest, as colonists grew increasingly infuriated with British policies. The riots began just a month after the Boston Tea Party, and the town's negotiations to restore order were regularly overshadowed by conflicts with British authorities. On March 8th 1774, the last day of physical confrontations over the hospital, Massachusetts residents were primarily concerned with the intrusion of a British appointment to the colonial judicial system; the Marblehead conflict was less shocking and less important to the readers of the *Essex Gazette* which put its story on third page of the newspaper. While it is tempting to connect the local mob violence with larger Revolutionary actions, the episode's concurrent nature revealed the unique nature of Marblehead's riots, separate from the cause of American liberty. The owners were ardent supporters of the independence movement; out of four, the group produced a Revolutionary war hero, a Massachusetts legislator, and a Vice President. Likewise, the townspeople would boast one of the highest rates of enlistment in the American militia. Rather than voicing support for revolution, the townspeople argued with the investors about the extent to which elites would control a republic.²

Historians have primarily integrated the outbreak of rioting within the context of the impending American Revolution. Mid-twentieth century scholars, such as George Billias, largely

² "Marblehead, March 8," *Essex Gazette*, March 8, 1774, *America's Historical Newspapers*; Christopher Paul Magra, *The Fisherman's Cause: Atlantic Commerce and Maritime Dimensions of the American Revolution* (New York: Cambridge University Press, 2009), 28.

reinforced the eighteenth-century viewpoint that the rioting was an anomaly in American history and that its most important consequence was the temporary disillusionment it caused some of the prominent Revolutionary leaders. Andrew Wehrman has recently illustrated that the riots are integral to analyses of the American Revolution, asserting that the rioting revealed much more about why “ordinary people” rebelled and what lines they drew against authoritarianism. These historians primarily considered the incident in the relatively narrow context of Revolutionary thought and action. Other scholarly research, such as Pauline Maier’s research, has examined the riots as part of a larger pattern of mob violence in colonial America. My work, along with incorporating a wider history of Marblehead’s specific trajectory as a town, focuses on the development of medicine and public health over the eighteenth century.³

Sari Altschuler has coined the term “epistemic crises” to describe “a central precipitating event” that “unseats central ideas about the health of the human body.” Castle Pox and the riots against it were simultaneously a moment of extreme fear of an epidemic, a new implementation of a scientific discovery, and a key political conflict. They can be understood as an epistemic crisis that influenced not only understandings of health, but also political thought. Altschuler analyzes the language of doctors and writers, revealing the changing understandings of medicine and the body. This thesis, however, engages the voices of political leaders, local fishermen, medical investors, patients, and physicians to demonstrate the varied impact Castle Pox had on medical and political thought.⁴

³ Andrew M. Wehrman, “The Siege of ‘Castle Pox’: A Medical Revolution in Marblehead, Massachusetts, 1764–1777,” *The New England Quarterly* 82, no. 3 (2009): 385–429; Pauline Maier, “Popular Uprisings and Civil Authority in Eighteenth-Century America,” *The William and Mary Quarterly* 27, no. 1 (1970): 4–35, <https://doi.org/10.2307/1923837>.

⁴ Sari Altschuler, *The Medical Imagination: Literature and Health in the Early United States* (Philadelphia: University of Pennsylvania Press, 2018), 13–14.

By focusing on the events of 1773 and 1774 in Marblehead, this thesis argues that Castle Pox's departure from medical tradition drove the rioting against it. The attempt to institute privatized health care underscored previously latent inequalities, helping define two social and political classes—the elites and the masses—that had opposing views of republicanism. With so many recent political battles intertwined with questions of health care accessibility, it is important to recall that such questions were deeply rooted in the foundations of the nation. In 1774, health care policy fundamentally changed the political landscape of Marblehead and proto-patriot thought.

In fact, the riots against Castle Pox revealed much about the early problems within local governance. Interestingly, the conflict had divided not along the lines of allegiance to the British crown, but instead largely on the basis of socio-economic class. The four proprietors of the hated Castle Pox—Elbridge Gerry, Azor Orne, John and Jonathan Glover—were committed Whigs and invested in the implementation of republican ideals within their town. Essex Hospital was one of many “improvements” that the Marblehead gentry had worked for and paid for during the late eighteenth century. On the other hand, the townspeople—mostly comprised of poor fishermen—were similarly committed to resisting British tyranny on its own merits, but they held a more democratic vision of how an American town should be governed. The riots, however, revealed more about Marblehead and early American society than just class divisions. Castle Pox helped shape and define two distinct and antagonistic demographics—those for private health care and those insistent upon its regulation—that otherwise were largely united in both revolutionary spirit and daily affairs. Not simply a symptom of inequality, Castle Pox's controversial nature arose from the implementation of a public health intervention in a class-stratified society.

Medical crises force communities to articulate what constitutes the public good, as they decide how to allocate limited resources, when to implement newfound technologies, and how to regulate private decisions in order to protect public health. Benjamin Rush's championing of American healthcare celebrated the recent adoption by both patients and physicians of new cures in the fight against yellow fever, implying that scientific experimentation and advancement were intertwined with individual liberty. For Rush in 1793, the implementation of medical innovation was inextricably linked to the freedoms found in the new Republic. In 1774, however, the townspeople of Marblehead asserted that they had a fundamental right not only to regulate these interventions, but to have their own access to health care.

Castle Pox created two distinct publics within Marblehead, each with its own understanding of governance and health. As resistance grew to the project, the investors increasingly drew distinctions between themselves and the unruly masses. As the owners amplified their commitment to Essex Hospital, the fishermen and townspeople recognized their power as a collective. Each side held fundamentally different views of how public institutions should be governed: did judgment fall to the elite and learned men or was it under the control of all citizens? Should a potentially life-saving, cutting-edge private hospital be allowed to exist, despite public concern over its accessibility and safety? Castle Pox brought these dormant questions to the surface. While the merchants of Marblehead had long dominated both society and politics, their intrusion into public health created new tensions in the town. This division would grow to have profound implications as American cities began to decide the extent to which local citizens would have control over their government.

Chapter 1: The Birth of Essex Hospital

Marbleheaders

Both the histories of Marblehead and early American medicine anticipated the creation, operation, and critique of Essex Hospital. The social stratification of Marblehead—which Essex Hospital underscored and exacerbated—had been developing since the town’s origins. While the biographies of the elites involved in Castle Pox reveal much about their political perspective, the history of Marblehead can illuminate the formation of another Marblehead polity—made up of fishermen and local workers, rather than proto-patriot merchants. Smallpox epidemics and inoculation sparked key moments in the shaping of the “Marbleheader” identity. As we will see, these health crises helped to define the “townspeople” as a specific political body that was both vulnerable to an epidemic and capable of political agency.

Marblehead’s origins were unlike those of other Massachusetts coastal villages. British settlers expanded into the region, originally inhabited by the Naumkeag tribe, to create a fishing port for the nearby town of Salem. Its earliest inhabitants were primarily Cornish and Jersey immigrants, leading to a distinct dialect regularly noted by eighteenth-century travelers. Salem retained the more religiously minded and community-focused townsfolk, while early legislation limited the type of settler that might be attracted to Marblehead. In January 1636, Salem passed a law that restricted the plot size allowable in Marblehead “to avoid the inconvenience found by granting land for fishermen to plant,” indicating and furthering the extreme specialization of the

town.⁵ Salem and Marblehead were only a few miles apart, but Marblehead's terrain was much rockier and much less arable, relegating the area to be a "kind of colony within a colony."⁶

This emphasis on fishing above other economic pursuits was unusual for the province, but the limited influence of religion similarly set it apart. The General Court in London discussed the difficulty of maintaining law and order in the area due to the absence of any clergymen. Selectmen in New England towns were responsible for the daily management of the town, including both legislative and executive actions. To be elected to such a position in Massachusetts (or to be eligible to vote at all), one had to be a member of the Church, a man, and could not be a slave. Since the residents did not establish a church until 1684, not a single Marbleheader was eligible to become a selectman. To incorporate the town in 1648, the Court had to make a special dispensation. The unique circumstance, then, required the appointment of town officials who would not be eligible to vote in any other Massachusetts Bay town to keep some sort of order. This supposed elite, however, was still regularly accused of breaking the law. Around half of the early selectmen had been prosecuted at some point, mostly for disorderly or violent conduct; in the 1660s, the citizens brought the selectmen to court three different times. In these early years, local authorities in Marblehead carried little distinction or moral authority over the rest of the town, creating a particularly equitable relationship between the selectmen and the rest of the population. Alcohol consumption was so ingrained into society that, at town meetings, "liquor was provided

⁵ Samuel Roads, *The History and Traditions of Marblehead* (Boston, Massachusetts: Houghton, Osgood, 1880), 12.

⁶ Christine Leigh Heyrman, *Commerce and Culture: The Maritime Communities of Colonial Massachusetts, 1690-1750* (New York: Norton, 1984), 226.

as a matter of course” and “as a consequence many were disorderly, and the meetings were frequently disturbed.”⁷

During the seventeenth century, British colonists enjoyed remarkable health outcomes, particularly in Massachusetts. One study “found that the first generation of men born in [Andover, Massachusetts] lived to an average age of 71.8 years,” rivaling modern day statistics. In comparison to British life, most colonists had access to an abundance of diverse foods, allowing proper nutrition and improved health. At the same time, small, isolated communities halted the spread of disease, leading to fewer epidemics. Whereas smallpox was common in European cities, few colonists were exposed or developed immunity. The lack of outbreaks in the seventeenth century, ironically, left Massachusetts towns particularly susceptible to epidemics in the eighteenth century.⁸

At the same time, medical practice was largely ineffective and unregulated. Few doctors existed in the colonies, and there was certainly no formal structure for medical education or its regulation. Medicine was primarily practiced by those without any training, including the clergy and townspeople themselves. Many cures were based in folklore and superstition: British colonists tried to stop “a nose bleed by having a few drops of blood fall on the knife” or cure “asthma by ‘measuring’—cut a stick the length of a child and place it up the chimney.” Even treatments coming out of universities were often unsuccessful in curing or preventing illness and disease. A number of doctors were apprentice-educated, meaning that they learned and trained under older practitioners of medicine. These physicians had little to no theoretical education, instead practicing

⁷ Roads, *The History and Traditions of Marblehead*, 15-16, 26; Heyrman, *Commerce and Culture*, 218-219.

⁸ Elaine G. Breslaw, *Lotions, Potions, Pills and Magic*, (New York: New York University Press), 67.

traditional cures and observing on the job what was effective. Their medical ability varied greatly based on who they were trained by, what tools they had at their disposal, and their own intellect. While apprenticed physicians were considered inferior in England and Europe, they were among the best prepared healers in the colonies. All medical practitioners in the eighteenth century, however, had little sustained success in treating patients. The maintenance of good health largely rested on luck, although epidemics could be somewhat contained by the regular practice of quarantine and isolation. Marblehead was susceptible to an outbreak like most colonial towns, and its people—part of an unruly population who rarely enforced or abided laws—were ill-prepared to respond to an epidemic.⁹

The eighteenth century brought change to both Marblehead and the field of medicine. Following the end of Queen Anne’s War (also known as the War of the Spanish Succession) in 1713, British colonists moved from Boston, Salem, and London into Marblehead, looking to capitalize on British dominance in the Atlantic trade. These outsiders sparked religious and social conflict in Marblehead, as earlier settlers chafed at the increasing supremacy of wealthy merchants who had only recently arrived in the town. Internal conflict spiked. As the historian Christine Heyrman noted, from 1719 to 1729, debt litigation against Marbleheaders nearly doubled. The majority of these cases had a wealthier merchant or shopkeeper as the plaintiff and the poorer fishermen as defendants, acting as “both a cause and symptom of the inequality overtaking the

⁹ For more on seventeenth- century British American medicine, see Oscar Reiss, *Medicine in Colonial America* / (Lanham: University Press of America, 2000); John Duffy, *From Humors to Medical Science : A History of American Medicine* (Urbana: University of Illinois Press, c1993); Elaine G. Breslaw, *Lotions, Potions, Pills, and Magic : Health Care in Early America* / (New York : New York University Press, c2012.), 53.

town.” This division was furthered by religious differences and a battle over the appointment of a new minister, ultimately priming the town for conflict.¹⁰

Inoculation was first introduced in the colonies in 1721 in Boston. The influential minister Cotton Mather learned of the practice through his slave, Onesimus, but a published account of the Turkish procedure by an Italian doctor convinced him of its safety and effectiveness. The practice involved taking material from an infected patient’s pustule to inject into an incision on an uninfected person. By doing so, inoculated persons likely would have milder symptoms when they contracted the disease and would develop immunity for the rest of their lives. Unlike vaccinations (which were invented in 1798), inoculated patients were contagious—making it essential that they were properly quarantined. Mather saw inoculation as being in line with both his understanding of theology and the natural world. In 1721, he got an opportunity to test out his theory. Smallpox entered Boston via the ship *HMS Seahorse*, and Mather wrote a letter to fourteen of Boston’s medical practitioners to ask for their aid. Only one—Dr. Zabdiel Boylston—responded, and the two began to inoculate citizens of Boston. Amongst learned Bostonians, Boylston was regarded as a quack. Much of the town was outraged—largely led by fear of the practice itself but increased by dislike of Mather and distrust of the doctor. The incident sparked violence within Boston, but the introduction of inoculation also established an ongoing argument in the city and the surrounding towns. As was one of the few practices that could act as a preventative—albeit potentially dangerous—treatment in colonial medicine, inoculation forced local societies to grapple with the potential risks and benefits, as well as the role of government in regulating it.¹¹

¹⁰ Heyrman, *Commerce and Culture*, 235-240.

¹¹ For more on the 1721 controversy, see Amalie M. Kass, “Boston’s Historic Smallpox Epidemic,” *Massachusetts Historical Review* 14 (2012): 1–51, <https://doi.org/10.5224/masshistrevi.14.1.0001>; John Ballard Blake, *Public Health in the Town of Boston, 1630-1822*. (Cambridge, MA: Harvard University Press, 1959). For its connection to the

The public discussion of inoculation caused a distinct change in the way practitioners wrote about medical science. The practice had gained some credibility, largely from the detailed account published by Boylston in 1726. The report, which is generally considered the earliest form of a clinical trial, included Boylston's data on the patients he had inoculated and their outcomes. Much of the other writing was based on natural philosophy, misguided medical theory, religious thought, or some combination of the three. A member of the clergy, John Williams, wrote a tract in 1721 that began "several arguments, proving, that inoculating the Small Pox Is not contained in the *Law of Physick, either Natural or Divine, and therefore Unlawful.*"¹² His work highlighted the most prevalent type of writing on inoculation, in that it was based on interpretations of natural laws to understand the physical world. Boylston's report—which instead included detailed observations on specific cases, the numbers of successes, and subsequent recommendations—indicated the beginnings of modern scientific inquiry.

Neither the approach nor the practice, however, had universal acceptance in the eighteenth century. The controversy stirred tensions in Marblehead, as several prominent citizens were inoculated during Mather's initial push and advocated for its use. Belief in inoculation represented connections to elite Bostonians and their outsider status. The practice itself signified change within intellectual circles in how medical knowledge was produced and how it would be implemented. Inoculation necessitated public discussions of the procedure, since an individual's election to have

changing role of medical practitioners, see Maxine Van De Wetering, "A Reconsideration of the Inoculation Controversy," *The New England Quarterly* 58, no. 1 (1985): 46–67, <https://doi.org/10.2307/365262>. For its relation and influence on the history of race, see Margot Minardi, "The Boston Inoculation Controversy of 1721-1722: An Incident in the History of Race," *The William and Mary Quarterly* 61, no. 1 (2004): 47–76, <https://doi.org/10.2307/3491675>.

¹² John Williams, "Several Arguments" (Boston: Printed and sold by James Franklin, 1721), Massachusetts Historical Society.

the procedure would affect the entire community. As a theory, inoculation and evidenced based medicine led to the need to engage with public health. As a practice, inoculation disturbed the social order within Marblehead. The 1721 epistemic crisis provoked colonists to grapple with how medical knowledge would be produced and how it would be implemented.

In August of 1730, smallpox once again became a danger to Marblehead and the surrounding areas; the town issued its normal precautions, quarantining those with symptoms and guarding the entrance to the town. On October 12, the town met to discuss further protective measures, including the possibility of inoculation. A majority struck it down, noting inoculation's effectiveness for individuals but its potential danger for the community at large. Contrary to the declared consensus that inoculation could be a credible cure, fear over the procedure remained throughout the community.¹³

Despite the ban, a number of Marblehead citizens dissented. In December of 1730, one of the justices of the peace, Stephen Minot, was overheard declaring that he would have his family inoculated, if his wife was not pregnant. For the townspeople, these potential inoculators could be infectious and spread the deadly disease to the entire town. Three days later, the comment had spread throughout the community and filled the town with fury. A mob of around twenty men accosted and interrogated the potential inoculators. Despite the satisfactory answer that no one had left for Boston to be inoculated, the crowd was only temporarily calmed. That night, the mob expanded to over two hundred men who surrounded the justice's house. Despite his pleas for help from the militia and the sheriff, Minot was largely left to fend for himself. He created a makeshift jail with the help of one of the militia captains and attempted to lockup the protestors, but the rioting only ended when all perpetrators were released. Only one member of the mob was ever

¹³ Heyrman, *Commerce and Culture*, 305-329.

convicted in court, frustrating the victims and demonstrating the widespread support the rioters enjoyed. While the majority of the pro-inoculation side had been elite and wealthy, their attackers also included some of the upper echelon of Marblehead society. Instead, the citizens were largely divided by those with longstanding ties to Marblehead and the new Boston transplants to the area.¹⁴

For a town that had largely ignored and chafed at law enforcement, Marbleheaders responded with great vitriol during the 1730 epidemic. Health crises required a response from the Marblehead populace, and residents turned to mob violence to bring order to their town. Rioting, particularly when so much of the population seemed to be in agreement, was ironically shown to be an effective tool in creating order within Marblehead. The epidemic simultaneously unified much of the Marblehead community against inoculation and outside interference on public life. Beyond revealing the seriousness of an epidemic, the response to the 1730 crisis indicated that the townspeople believed themselves—rather than Boston transplants, wealthy merchants, or the colonial government—to be the ultimate authority when public health was concerned. While mob violence was certainly not a formal institution to combat health crises, it was an example of collective action within Marblehead that had so far rarely occurred. The rioting cemented the townspeople as a distinct polity, capable of disciplining law-breakers and (supposedly) protecting the town's health.

At the same time, the scourge of smallpox severely disrupted Marblehead's economy. The 1730 smallpox outbreak required the halting of fishing for almost a year, illuminating the seriousness of any epidemic and the stakes that inoculation could carry for the town. In 1731, however, almost immediately after the town returned to trade, the British government levied a six pence tax on all fishermen. While they had previously been exempt, the fishermen were now

¹⁴ Heyrman, *Commerce and Culture*, 305-329.

required to help fund the Greenwich Hospital, located in England, to support seamen. Of course, the measure infuriated Marblehead sailors who were unlikely to ever receive care from this institution. After some discussion and individual protests, the entire town denounced the tax. This overreach on the part of the British government united the previously divided populace. In the town meeting, both wealthy newcomers and longtime Marblehead fishing families agreed to pay for the legal fees for any Marbleheader who ignored the tax. While riots were quite common in Marblehead society, they largely served to enforce or negotiate local regulations. Outside threats, including unpopular British acts, were largely negotiated within the formal setting of town meetings. Violence served instead to assert power in local governance and importantly to promote public health.¹⁵

“Codfish Aristocracy”

By the late eighteenth century, Marblehead had transformed into a powerful port city. One hundred fifty ships sailed out of the Marblehead harbor, employing around 1000 sailors and fishermen. These fishermen were almost exclusively young white men, often locally born and rarely related to their employers. At least sixty merchants were involved in international trade, engaged in commerce primarily with the West Indies and southern Europe; these elites made up a class that managed and employed an enormous number of laborers in Marblehead. About 5,000 inhabitants lived within Marblehead, which placed it as the sixth most populous city in the colonies at the time. An 1802 account by the traveling minister John Eliot noted that “its proportion in the

¹⁵ Roads, *The History and Traditions of Marblehead*, 49-51.

province tax was next to Boston, and it was supposed at that time to have imported more hard money than any other town in the province.”¹⁶

Despite its newfound wealth and importance, Marblehead was defined by both social and economic inequality. It is estimated that by 1770, the top 10 percent owned 61.8 percent of the town’s real and personal property. The poorest 30 percent owned only 1.9 percent of the wealth. Around 20 percent of the total population worked as sailors, indicating the dominance of the industry and physical labor. Elites in the greater Boston area still condescended to the townspeople of Marblehead. The town was well known for its rough nature and for its public house and tavern, the “Fountain Inn,” which was rumored to be a hang-out of pirates, smugglers, and sailors looking to drink. But while this had been true for much of Marblehead’s history, the emergence of wealth and power in the region created more internal awareness of the town’s problems. In March 1761, the town meeting noted an increase of “poor idle, vagrant and disorderly persons,” perhaps more indicative of the increase of socially-minded citizens considering the town’s history.¹⁷

Transients—on both ends of the economic spectrum—began to leave Marblehead. Merchants began to engage in direct trade with Mediterranean and Caribbean ports, reducing the town’s dependence on larger cities and on temporary labor. During the 1730s and 1740s, reliance on British investment, seasonal British mariners, and indentured servants declined. Immigration stalled, but the population continued to rise from local growth instead. By 1748, Marblehead had 620 taxpaying households, of which 495 had been in the town since 1720. At the same time, many

¹⁶For more on the role of fisherman in colonial society, see Magra, *The Fisherman’s Cause*; George Athan Billias, *John Glover, Revolutionary War General* (New York, 1958), 17. For more on the rise of merchant families in New England, see Bernard Bailyn, *The New England Merchants in the Seventeenth Century* (New York: Harper & Row, 1964).

¹⁷Heyrman, *Commerce and Culture*, Appendix 1; Roads, *The History and Traditions of Marblehead*, 69.

of the wealthy outsiders who had been the impetus for the 1730 smallpox riots had abandoned Marblehead in favor of Boston. Many had realized that the success of Marblehead was beginning to undercut Boston's own profits and defected to the capital.¹⁸

Replacing those who migrated to Boston was a new upper class, invested both in Marblehead's economic success and political stability. Often called the "codfish aristocracy," a smaller group of wealthy merchants began dominating the Atlantic cod trade; many of these men resided in Marblehead. After Boston transplants deserted the Marblehead project, locals continued to make huge profits in the shipping and fishing industries. United against larger cities, the merchants formed close networks within Marblehead to continue economic growth. The merchants cultivated respect and trust from the working classes of the area. This included hiring mainly Marblehead sailors and fishermen and joining local institutions, including the First Church that many of the lower classes belonged to. Likewise, the merchants pursued particularly conservative economic investments, foregoing risky but lucrative ventures to protect the town and the workers from ruin. They began to be known by affectionately authoritative nicknames, including "King" and "Doctor." Whereas Marblehead had long been viewed as an industry town, distinct from its Puritanical neighbors, the influx of wealth created a new interest in moral respectability. Two of the proprietors, Azor Orne and Elbridge Gerry, were the children of this upper-class, raised by those who were dedicated to the reputation and progress of Marblehead.¹⁹

As money poured into the merchant families, leading Marblehead residents invested in and initiated several projects designed to improve the general welfare and respectability of the town. In 1751, the wealthy merchant Robert "King" Hooper purchased an engine for the town's new fire

¹⁸ Heyrman, *Commerce and Culture*, 330–37.

¹⁹ Magra, *The Fisherman's Cause*, 28; Heyrman, *Commerce and Culture*, 337–65.

department. Fines were imposed for gambling in March 1752 in an attempt to curb the rowdy behavior of the sailors, but it was largely unsuccessful. A work-house was built in response to the complaints about the “poor idle, vagrant and disorderly” mentioned earlier. In 1762, the roads, streets, and alley-ways were first formally named; in the past, they had been largely referred to “the most curious names, some of them not suitable for ears polite” according to the nineteenth-century chronicler of Marblehead Samuel Roads. In 1763, a market opened in the lower part of the town house that dictated eleven well-enforced rules to ensure the safety of the meat sold and to prevent upselling the products later on. Whereas the Boston transplants—who saw themselves as Bostonians in Marblehead—had largely left the town alone, these projects were essential in transforming Marblehead into an appropriate town for its ruling elite and demonstrating their commitment to the locals. When Elbridge Gerry, Azor Orne and John and Jonathan Glover signed onto be the proprietors of Essex Hospital in 1773, they likely saw the project as a legacy of these changes.²⁰

In addition to fishing, Marbleheaders were well known for their resistance to what they considered unfair policy; these efforts were supported by residents across the economic spectrum. When the General Court passed an excise duty in 1754 on fruits and alcohol, the town voted to elect six of the wealthiest merchants to hire a London lawyer to directly petition the king. In response to the Stamp Act in 1765, merchants signed a formal agreement to boycott English goods, and sailors flew flags at half-mast. In 1769, a British ship attempted to impress the Marblehead brig the *Pitt Packett*. The Marblehead sailors refused, engaged in a three-hour hand-to-hand battle resisting the British soldiers, and, in the process, killed a British lieutenant. They were ultimately surrounded and taken to Boston for a murder trial, where they were defended by John Adams and

²⁰ Roads, *The History and Traditions of Marblehead*, 52; 63–71.

acquitted. Adams would later contend that this episode had increased American sympathies more and earlier than the British Tea Party, stating that “no trial had ever interested the community so much before.” Marblehead was largely united in resistance towards British tyranny and was often noted as second only to Boston in terms of patriotic fervor in contemporary accounts. Although the *Pitt Packett* highlighted some of the early physical resistance to the British, those efforts were aligned and supported by legal defense afterwards. This violence in some ways recalled the rioting of the 1730 crisis; although the codfish aristocracy had used their private money and resources to create the town they envisioned, the fishermen had been successful in displays of brute force. These revolutionary efforts underscored the connection between the fishermen and wealthier citizens despite differing methods.²¹

While anti-British sympathies were rising, smallpox once again entered the town of Marblehead. In the summer of 1773, the wife of Mr. William Matthews, who had recently returned from the Grand Banks, became ill; the town assumed that she had been poisoned by some sort of French soap rather than that she had contracted smallpox. Over one hundred and fifty neighbors visited the household. When the town realized that Mrs. Matthews was ill with smallpox and not in fact poisoned, it recognized the potential for an outbreak. Quarantine was quickly ordered, all dogs were killed, and around thirty citizens died of the disease.²²

On the 9th of August 1773, a town meeting was called to discuss alternative measures to combat smallpox for later outbreaks. In 1764, Boston had carried out a successful general inoculation, sparking significant interest in the procedure. Not to mention its potential life-saving

²¹ Roads, 63; George Athan Billias, *General John Glover and His Marblehead Mariners* (New York: Holt, 1960), 27–30; John Adams, *The Works of John Adams, Second President of the United States [Electronic Resource] : With a Life of the Author, Notes and Illustrations*, ed. Charles Francis Adams, vol. 10 (Boston: Little, Brown, 1850), 210.

²² Roads, *The History and Traditions of Marblehead*, 91.

benefits, implementing inoculations could act as a status symbol for the town, indicating both progressiveness and wealth, comparable to a modern day city investing in eco-friendly transportation. A general inoculation, like that in Boston, would require the halting of merchant operations, however, and was never taken seriously by the proprietors or discussed at town meetings. The proprietors would later write that a “general inoculation would nearly ruin the town.” Instead, the discussion centered around whether a hospital—funded by the town or private investment—could be erected. The selectmen, who at the time included Azor Orne and John Glover, clearly favored a privately run hospital: the private hospital would allow Marblehead to experience neither “expence [nor] trouble.” The town voted to approve the petition (which had been filed by over a dozen citizens) to build a private hospital. If Marblehead was to be second to Boston in population, trade, and patriotism, following its example in public health seemed only natural. Just as the local elites had already invested their own money in other public projects, they seemed ready to foot the bill for this new innovation as well.²³

There were several important caveats to the approval, however, indicating some ambivalence. Salem’s selectmen would likewise have to consent to the project since most of the islands in the shared harbor were under their jurisdiction. While this in some ways harkened back to Salem’s earlier control of Marblehead in the seventeenth century, the neighboring town’s involvement in the project was more indicative of the expected controversy. Rather than being a necessary step, approval from the Salem selectmen could protect the hospital from later criticism. The hospital would be subject to the regulation of the Marblehead selectmen as earlier quarantined areas had been. The townspeople underscored that public health—even when a private actor was

²³ Elbridge Gerry et al., “A Narrative of the Late Disturbances at Marblehead,” *Essex Gazette*, May 21, 1774, Bound Copy of the Essex Gazette, The Boston Athenaeum. Marblehead Town Records, 9 September 1773, Office of the Town Clerk, Abbott Hall, Marblehead, Mass.

involved—should be under the jurisdiction of government. The location, which had never been named, was assumed to be Tinker’s Island, hidden from view and largely isolated from fishermen’s routes. After the plan passed, however, the organizers revealed the location to be Cat Island—remarkably close to the Marblehead shore and along the main shipping route. This threatened the town’s economic well-being, perhaps a sign that the well-trusted elites did not have the fishermen’s best interests in mind. As more about the hospital was revealed, it became clear that its proponents were more interested in its long-term potential than its short-term effects for Marblehead’s people.²⁴

As the approval process continued, controversy only continued to build. The Salem selectmen first voted against the hospital, but they ultimately reconsidered—another indication that Salem actually had little control over the hospital’s fate. It would only be approved, however, if the Massachusetts General Court approved it as well. The Court was out of session, so the Marblehead petitioners wrote an appeal to Governor Hutchinson and included a total of 432 signatures of Marblehead, Salem, and neighboring villages. The Governor noted that he had no direct authority, and the case was sent back to Salem. The selectmen approved the measure, but noted that the hiring of the physician must be subject to the approval of the Marblehead officials, including “the fees and expences.” The complications in this approval process hinted at the reluctance of Salem to approve the project, and at the sustained and robust interest the petitioners had in building the hospital. At this point as well, many of the original petitioners dropped out of the project, leaving only Orne, the Glovers, and Gerry as the proprietors. These men were

²⁴ Andrew M. Wehrman, “The Siege of ‘Castle Pox’: A Medical Revolution in Marblehead, Massachusetts, 1764–1777,” *The New England Quarterly* 82, no. 3 (2009): 394–97.

particularly connected to the Revolutionary cause and involved in intercolonial organizations and local governance.²⁵

The building and establishment of the hospital led to increasing suspicion and reluctance over the project. By early September, the proprietors bought the Cat Island property and began construction. At the same time, a few Marbleheaders submitted a new petition to the selectmen, indicating the early frustrations of much of the town; its argument rested on the facts that one, the town had neither enough information during the original vote and two, that the busy port city of Marblehead was not an appropriate place for an inoculation hospital. They suggested other locations in the colony that instead could house a public hospital funded by the provincial treasury. The proprietors revealed that the cost to be a patient would be 5 pounds and 15 shillings, far more than would be affordable to the average citizen. For example, a local diarist and sailor reportedly made only 40 pounds in a year, making an individual's fee almost 13% of his annual income. The proprietors would inoculate for free one out of every ten patients to allow the poor of Marblehead to take part, but this charity heightened the lack of affordability. The "poor" was a specific category including not only the economically disadvantaged, but widows, orphans, the sick, and the mentally ill. The act of medical charity did not increase accessibility for the majority of Marblehead citizens who were part of a sea-faring working class, not the "poor."²⁶

Even prior to the arrival of the first patients, anger was percolating in Marblehead. For the fishermen the elites had essentially tricked the town, Salem, and the General Court into approving

²⁵ Gerry et al., "A Narrative of the Late Disturbances at Marblehead."

²⁶ Gerry et al.; Wehrman, "The Siege of 'Castle Pox,'" 398. For more information on medical charity in Essex County, see Douglas Lamar Jones, "Charity, Medical Charity, and Dependency in Eighteenth-Century Essex County," in *Medicine in Colonial Massachusetts, 1620-1820: A Conference Held 25 & 26 May 1978* (Charlottesville: Distributed by the University Press of Virginia, c1980), 199–213.

a project they would have rejected with more information. But in the proprietors' eyes, they spearheaded a project that would advance the town's welfare and would greatly benefit the larger community. They called a town meeting to discuss the recent criticisms, which they stated were "void of humanity or manly ingenuity." The proprietors thought that a few individuals—likely the few Marbleheaders who were still advocates of the Crown—had been stirring up controversy, alleging the foursome would make a huge profit off a hospital that could endanger the town, and they offered to sell the property to underscore the falsehood of these claims. While it is impossible to know the extent to which the larger population was influenced by a few instigators, the investors' willingness to sell clarified their purpose. They did believe that a private venture could and should contribute to the general improvement of Marblehead, stating that they hoped the project would not "be defeated by unreasonable Clamour or Malice" due to its potential to do good. The town meeting ultimately came to nothing. Discussions stalled and conflict continued. Without a new vote or a clear resolution, the town allowed Essex Hospital to be erected.²⁷

By the October opening of Essex Hospital, the tensions in the town had already begun to intensify. The anger towards the hospital was summed up by the sailor Ashley Bowen who kept a meticulous diary that details much of the comings and goings of Cat Island during this period and coined the term "Castle Pox." On the day of the grand opening of the hospital, October 19, 1773, Bowen wrote that "Colonel Orne with a body of volunteers...landed at Cape Pus on the NW end of the Isle of Cat and laid siege to the Castle of Pox."²⁸ This began his extended analogy of Essex Hospital as both a military fort and a home for Marblehead's royalty. The proprietors believed the opposition was driven by some of the leading loyalists, including Robert "King" Hooper who had

²⁷ Wehrman, "The Siege of 'Castle Pox,'" 398–99.

²⁸ Bowen, 362; Wehrman, "The Siege of 'Castle Pox,'" 399. Marblehead Town Records, 13 September 1773.

originally been involved with the plan but then abandoned it. The first cohort's inoculation was smugly reported in the *Essex Gazette*, writing that "we must however expect that our benevolent News-mongers will be much concerned...[who] in their Grief really reported that some of them were dead."²⁹ What resulted was two distinct views of the appropriate governance of Marblehead: Bowen and the sailors wanted appropriate representation and choice in the matters of public health and town regulation while the proprietors hoped to improve the town's health through a procedure that had been proved successful and an institution that could effectively administer it. The divisions over government and public medicine would only deepen as plans for the hospital developed.

²⁹ "Marblehead, November 1," *Essex Gazette*, November 2, 1773, *America's Historical Newspapers*; George Athan Billias, "Pox and Politics in Marblehead, 1773-1774," *Essex Institute Historical Collections* 92 (1956); "Advertisement, October 26," *Essex Gazette*, October 26, 1773, *America's Historical Newspapers*.

Chapter 2: “Enockulation Gentry”

The Tuesday Evening Club

The unusual—and controversial—nature of Essex Hospital arose from the unique configuration of those involved. In 1773, only two hospitals existed in the colonies, although there were many examples of almshouses—which catered to the poor, sick and old—and pesthouses—which served to quarantine disease. The few inoculation hospitals were either run by a private physician or commissioned by provincial governments or cities. Castle Pox, however, was funded by private investment, making it one of the first privately owned hospitals and medical practices in colonial America.³⁰ The proprietors hired Hall Jackson, one of the most eminent and expensive doctors in New England to attract outsiders to the region. Both the fashionable doctor and the useful procedure of inoculation drew a wealthy class of patients. While this prestige pleased the proprietors, the fishermen of Marblehead were made acutely aware of the division between the villagers and the Castle Pox patients. Understanding the specific background and roles of the proprietors, the doctor, and the patient is essential to grasping the reasons for why the hospital became such a contested institution and an emblem of larger tensions in colonial medicine.

The owners of Castle Pox consisted of four local men: Elbridge Gerry, Azor Orne, and the brothers John and Jonathan Glover. All were from important merchant families with connections to the elite Boston community who would ultimately play vital roles in the American Revolution. The proprietors, as well, were all first generation Marbleheaders. Gerry’s father had immigrated from England, while the Glovers and the Ornes had moved from Salem to Marblehead. Politically, each was a member of the Whig party and each dominated local Marblehead politics. Both Orne and John Glover also served as two of the five selectmen of Marblehead which gave them status,

³⁰ Duffy, 34-38.

power over political decisions, and experience in regulating the actions of others. Due to their numerous public positions, Salem resident Dr. William Bentley wrote that “the leading men [Orne and the two Glovers] had power nowhere else known in N. England.”³¹ Their individual interest in inoculation remains unclear, but the increasing popularity of the procedure (particularly among the well-educated and elite) might have convinced the four to invest their own money in the hospital. With no medical training, they acted primarily as financial backers and administrators. The proprietors became investors in a medical institution which was perhaps the first time in the colonies that non-practitioners hoped to make money off of health care.

The singular role of the “proprietor” was distinct from other roles in early medicine, adding to the conflict between them and much of Marblehead’s populace. The paradoxical office of the proprietor required both subservience to the town’s will and a commitment to acting for the general good. Gerry, Orne, and the Glover’s previous experiences and personal philosophies made them unable to do either. Whereas prior inoculations and hospitals were officially controlled by the state or by individual medical practitioners, Essex Hospital rested on four private citizens to protect the town and increase the accessibility of inoculation. Listening to the general populace, however, was in many ways antithetical to the proprietors’ understanding of themselves.

Elbridge Gerry was both the most politically influential of the proprietors and the most actively involved in the hospital’s daily affairs. Bowen’s diary described the daily comings and goings to Cat Island, regularly featuring Gerry shepherding patients, town officials, and other visitors back and forth.³² The Gerrys were among the most prominent families in Marblehead despite being only recent immigrants (his father arrived from Britain in 1730), and Elbridge

³¹ George Athan Billias, *General John Glover and His Marblehead Mariners* (New York: Holt, 1960), 36.

³² Bowen, 329-388.

benefitted from his family's wealth. He was educated at Harvard and was a regular correspondent with some of the most eminent revolutionaries and Bostonians, including Samuel Adams. Gerry's political opinions were indicative of some of the problems with Essex Hospital itself, as he firmly believed both in the power of republicanism and the fallibility of the general populace. Gerry would eventually die in office as James Madison's Vice President; his tombstone read "it is the duty of every man, though he may have but one day to live, to devote that day to the good of his country."³³ His commitment to the controversial Castle Pox may seem contrary to his belief in service to country, but Gerry also was insistent on his ability to know what constituted "the good of his country." His later political career revealed a similar fear of the tyranny of the people, as he was one of the foremost proponents of indirect elections and eventually approved the redistricting of Massachusetts to ensure Republican Senate victories. Due to this unpopular act, the term "gerrymandering" was named after him, once again revealing his tendencies to favor his judgment over democratic choice.

The Glovers were less politically influential than Gerry, and they had a long and varied relationship with the fishermen and townspeople. While Gerry and Orne inherited some of their wealth, John and Jonathan Glover created most of their own fortune. The Glovers had been left fatherless as children and came from a family of artisans but grew to become prosperous Marblehead merchants. As they accumulated wealth, the Glovers worked to gain political and social status as well. Jonathan spent his money on an extravagant house and an abundance of servants. His brother John similarly worked to integrate himself with what was known as the "quality," the most elite social group of Marblehead. He joined what was known as the "Tuesday

³³ "A Founding Father in Dissent," National Archives, August 15, 2016, <https://www.archives.gov/publications/prologue/2006/spring/gerry.html>.

Evening Club,” which included all the most influential Marblehead men, although its purpose remains unclear.³⁴ The members included Gerry and several other men who would go on to take leading roles in the American Revolution and the early Republic. As revolutionary spirit grew in the late eighteenth century, John Glover’s membership in the Committee of Correspondence and Safety displayed not only patriotic spirit, but also elite status. Being a proprietor for Essex Hospital would help build a similar reputation. While it would be difficult to make a profit off of the hospital, the men were clearly interested in establishing and joining institutions serving the “quality” and manifesting the ideals of a republican city.

“General Hall Jackson, Grand Physician”

The elite proprietors of Castle Pox chose an eminent physician to lead the inoculation hospital: Dr. Hall Jackson. Jackson was regularly described as one of the most influential medical minds in New England, but, like many American doctors, he had studied as an apprentice to his father rather than at a university. In the eighteenth century, it is estimated that around 36 percent of colonial doctors had at least a year of apprenticeship, making Jackson part of the better trained group of colonial physicians. Still, around 25 percent in the colonial period had some higher education—whether it be a college degree from an American institution or a medical degree from a European university.³⁵ Jackson was chosen by the owners of Cat Island to head the project. He had previously worked as a traveling physician and authority on inoculation. Similarly, he was a regular writer and contributor to the colonial medical literature, publishing not for other scientists

³⁴ Billias, *General John Glover and His Marblehead Mariners*, 20-24.

³⁵ Eric H. Christianson, “The Medical Practitioners of Massachusetts, 1630–1800: Patterns of Change and Continuity,” in *Medicine in Colonial Massachusetts, 1620-1820: A Conference Held 25 & 26 May 1978* (Charlottesville: Distributed by the University Press of Virginia, c1980), 199–213.

but for a more general population. Jackson's fame stemmed not only from his intellectual contributions but also his Revolutionary leanings and Whig politics. Like many of the colonial leaders, he exemplified the versatility expected and admired by the emerging American elite. For the proprietors of Essex Hospital, this made Jackson a worthy hire. But for the citizens of Marblehead, his appointment and presence underscored the divisions between them and the patients at Castle Pox.

Jackson's biography was consistent with many colonial American doctors. Born in 1739 in Hampton, New Hampshire, Jackson was the son of the physician Clement Jackson. He originally apprenticed with his father, but in 1762 he traveled to London to work and train in British hospitals. While he never completed any formal training there, even this professional experience set him apart.³⁶ Jackson, like many New England medics, practiced medicine, botany, and surgery. The 1840 *Encyclopedia Americana* noted that "he was the first who attempted in that part of the country, the operation of couching the eye, in which he was uniformly successful," describing Hall's unique ability to operate on cataracts.³⁷ In addition to his surgical skills, Jackson was known as an expert inoculator. After his return from London, Jackson introduced inoculation to Portsmouth in 1764. He oversaw the quarantine and release of hundreds in Portsmouth; his success led him to become part of a new class of doctors trusted with variolation, in which a doctor would inject material from a smallpox pustule into a healthy patient.³⁸

As it grew in popularity, inoculation had become one of the most profitable strains of

³⁶ J. Worth Estes, "An Account of the Foxglove in America," *Bulletin of the History of Medicine* 47, no. 4 (1973): 3.

³⁷ Francis Lieber, *Encyclopædia Americana: A Popular Dictionary of Arts, Sciences, Literature, History, Politics, and Biography*, (Thomas, Cowperthwait, & Company, 1840), 147.

³⁸ Mark Sammons and Valerie Cunningham, *Black Portsmouth: Three Centuries of African-American Heritage* (UPNE, 2004), 57.

colonial medicine. For American medical practitioners, the procedure was one of the first preventative treatments available; as the historian Julie Miller noted, immunization was an "income-generating service to families on a nonemergency basis."³⁹ The historian Sarah Blank Dine observed that Philadelphia physicians "could rely on inoculation to provide 10 percent to 20 per cent of their fees in any given year, and in the spring months, March, April, May, when inoculation was recommended, it could supply 50 per cent of their fees and income."⁴⁰ Since the procedure was more readily practiced in non-emergent cases in Philadelphia than in Massachusetts, local doctors began to shape their business around preventative care. In New England, however, inoculation was more often conducted during smallpox outbreaks rather than in the years beforehand; instead of sustaining local operations, inoculation became the industry of a select group of physicians. In 1764, a smallpox epidemic also overtook Boston; over five professionals traveled to oversee the inoculations, including Jackson.⁴¹

Jackson's role in Boston's public health program propelled him to local fame as an expert inoculator. Although the epidemic began after the ship *Nancy* arrived in Boston in December of 1763, the disease did not spark interest in inoculation until March 13. The town decided to establish public hospitals and allow private inoculations to control the epidemic. Because a large number of Bostonians were interested in the procedure, the selectmen hired other outsider doctors including Jackson to reside in Boston and help with their efforts. The overall program was enormously successful; it is estimated that around 18 percent of the un-inoculated and infected died, whereas

³⁹ Julie Miller, "Paying the Doctor in 18th-Century Philadelphia | Library of Congress Blog," webpage, April 28, 2016, //blogs.loc.gov/loc/2016/04/paying-the-doctor-in-18th-century-philadelphia/.

⁴⁰ Sarah Blank Dine, "Diaries and Doctors: Elizabeth Drinker and Philadelphia Medical Practice, 1760-1810," *Pennsylvania History: A Journal of Mid-Atlantic Studies* 68, no. 4 (2001): 413-34.

⁴¹ Blake, *Public Health in the Town of Boston, 1630-1822*.

less than one percent of the inoculated did.⁴² The Boston initiative led to increasing interest in the practice by both local towns and in the rest of the colonies. While not quantified until later analyses, the achievement was well-known throughout the colonies. Another Portsmouth doctor, Dr. Nathaniel Adams, wrote that “Dr. Hall Jackson resided in Boston for two or three months, and carried several classes safely through the disorder by inoculation; a large number went there from this town, to put themselves under his care.”⁴³ Adams’ comment also reveals the common practice of travel to receive medical care. Resembling what we might call medical tourism, Portsmouth residents journeyed to Boston to take part in the mass inoculation efforts, despite the danger of spreading the epidemic. In Marblehead, too, patients were not exclusively from the town; the erection of the inoculation hospital would encourage outsiders to relocate temporarily. Jackson’s accomplishments, however, led to further investment by Portsmouth in publically subsidizing the practice in 1766. “The physicians were allowed eight dollars for each patient under their care,” Adams added, “excepting every tenth person, who was a pauper sent by the committee.”⁴⁴ Both Boston and Portsmouth’s public health ventures were tightly regulated by the Selectmen of each town; Jackson was hired in each case by the town or the patients directly.

As a prolific local writer, Jackson furthered his reputation as a competent doctor in the public eye. Jackson was a regular contributor to early American medical writing. Importantly, however, much of this conversation occurred not amongst the British university-trained physicians, but within the greater colonial community. Since much of early American medicine was practiced by laypersons, eighteenth-century articles and books were published for both

⁴²J. Worth Estes, *Hall Jackson and the Purple Foxglove: Medical Practice and Research in Revolutionary America, 1760-1820* (Hanover, N.H.: University Press of New England, 1979).

⁴³ Nathaniel Adams, *Annals of Portsmouth*, (Portsmouth, published by the author, 1825), 207.

⁴⁴ Adams, *Annals of Portsmouth*, 33-34.

practitioners and the public alike. Medical books, such as the 1734 edition of *Every Man His Own Doctor: Or, The Poor Planter's Physician*, were regularly published as guides for untrained healers and patients themselves, rather than for an academic audience. Those who had no formal education in medicine also participated. The book *Primitive Physic*, in which a Methodist clergyman outlined his thoughts on healing, went through seven editions in America from 1747 till 1849.⁴⁵ Jackson was immensely successful in taking advantage of this widespread interest in medicine. In 1786, he wrote *Observations and Remarks on the Putrid Malignant Sore-Throat* which included preventative tips and notes on lessening one's symptoms, rather than instructions for doctors. As previously noted, Jackson was known for his surgical skill, particularly for his ability to couch an eye with cataracts—a technique first developed by the Romans. The slave owner Samuel Clarke published a review for Jackson in the *New Hampshire Gazette* after Jackson “instantaneously restored [his slave] to Sight, so that he has been capable all this Season of working in the Fields, and takeing Care of Cattle.” While Jackson was not necessarily on the cutting edge of research at the time, his local success underscored his ability as a doctor. Medical articles were common features of newspapers at the time, including both testimonials like Clarke's and writings from physicians themselves. Jackson contributed to this popular medical literature: in February 1768 he wrote two detailed features on amputation that occurred a week apart for the *New Hampshire Gazette*. For the literate population of New England, Jackson advertised his own trustworthiness directly to the consumer and patient, rather than to an academic world.⁴⁶

Jackson's Whig politics and support for the Revolution likely contributed to his well-known reputation amongst elite Bostonians. The doctor wrote from Castle Pox in December of

⁴⁵ Breslaw, *Lotions, Potions, Pills, and Magic*, 48, 54.

⁴⁶ Samuel Clarke, *New-Hampshire Gazette*, October 5, 1770, *America's Historical Newspapers*; Estes, *Hall Jackson and the Purple Foxglove*, 6–12

1773, just before the Boston Tea Party about his hope that the Portsmouth Selectmen would continue “to keep out that pernicious, banefull, and poisonous Herb which the wicked East India Company are endeavouring to cram down (in such abundance) into the Gullets of a free...People.” Both his revolutionary feelings and medical prowess were well-known. The royal governor John Wentworth expressed his ambivalence in hiring Jackson due to his political leanings. He wrote that “none can be more ready for the office than Hall J—n; neither can there be one more deceptive or less to be relied on....he prefer’d the jolly, laughing servants’ hall to the master’s parlour.”⁴⁷ Jackson would go on to serve as a Continental Army Surgeon during the Revolutionary War. John Adams even hoped that Jackson would be named the “Chief physician & director general” of the Continental Army (a precursor for the position of Surgeon General), writing that “Dr. Jackson’s great Fame, Experience, and Merits were pleaded in vain” to the Continental Congress. This circle of Whig political leaders importantly intersected with the audience reading Jackson’s medical work, including the proprietors of Essex Hospital.⁴⁸

The townspeople of Marblehead were similarly aware of Jackson’s elite reputation but chafed at the imposition he posed to the town. Ashley Bowen wrote in his diary on October 15 that “this day came to town General Hall Jackson, Grand Physician, for inoculation on Cat Island with a number of volunteers with him.”⁴⁹ Bowen emphasized the “grandness” of Jackson, implying the town’s knowledge of the physician’s status. As the historian Andrew Wehrman notes, Bowen “called him ‘General,’ thus insinuating that Jackson’s inoculations threatened the community like

⁴⁷ Estes, 42.

⁴⁸ John Adams, Samuel Adams, and James Warren, *Warren-Adams Letters: Being Chiefly a Correspondence Among John Adams, Samuel Adams, and James Warren ... 1743-1814*, vol. 72–73 (Boston: Massachusetts Historical Society, 1917), 143.

⁴⁹ Ashley Bowen, *The Journals of Ashley Bowen (1728-1813) of Marblehead*, ed. Philip Chadwick Foster Smith, vol. 45 (The Colonial Society of Massachusetts, 1973), 361.

an unwanted military occupation.”⁵⁰ While Jackson was an attraction for many of the patients that came to Castle Pox, he seemed to pose a threat to the smaller community of Marblehead residents. Interestingly, there was a university trained physician who was a Marblehead resident, but who was not part of the inoculation project; Dr. John Lowell graduated from Harvard in 1753 and resided in Marblehead until his death.⁵¹ While it cannot be known why exactly he did not collaborate on Castle Pox, the introduction of a non-local doctor into Marblehead posed problems for many of its citizens. The contrast between the celebration of Jackson’s arrival by the wealthy and the admonition from locals emphasized the difference between the two systems of medical care. Contrasted with the royal governor’s concern that Jackson felt too great of an allegiance to the “servants’ hall,” the townspeople’s perception instead revealed his distance from them.

Doubt over the necessity of Jackson was furthered by a new publication discussing the simplicity of the inoculation procedure. In October 1773, the *Essex Gazette* published an excerpt from the famous Scottish physician William Buchanan’s book *Domestic Medicine: or, the Family Physician* printed by the *Essex Gazette*. The article discussed inoculation, noting that “almost all the danger from [smallpox] may be prevented by inoculation” and that “no discovery can ever be of general utility while the practice of it is kept in the hands of a few.” Buchanan wrote that anyone “may rest assured that he will succeed as well as the most celebrated inoculator.”⁵² Buchanan continued to note that women were the primary practitioners of inoculation in Turkey, thus implying to a colonial audience that inoculation did not require expertise. Male apprenticed or university-educated physicians treated difficult cases and serious illnesses, but they were not regularly called upon because of their expense. Because physicians were not required for a

⁵⁰ Wehrman, “The Siege of ‘Castle Pox,’” 401.

⁵¹ *Medicine in Colonial Massachusetts, 1620-1820*, 137.

⁵² “Salem, November 2,” *Essex Gazette*, November 2, 1773, *America’s Historical Newspapers*.

successful inoculation, Buchanan accused those who charged excessively for the procedure of misleading and manipulating their clients. The article, unsurprisingly, fueled the anger of the townspeople who had been ambivalent about the hospital to begin with. Castle Pox was run by one of these “celebrated inoculators” that Buchanan was critiquing; Jackson was part of an American group of physicians that began taking part in scientific discovery and associating medicine as an industry and field of academic study rather than as a trade practice.⁵³ Buchanan’s book focused on providing medical advice for the “family physician,” consistent with much of early American medicine and resonant with what the ordinary Marblehead fisherman would expect from health care.

Bowen’s diary further revealed the type of care his family and friends regularly received; rather than investing in a physician, Bowen noted that the local community cared for a woman named Mother Shaw: “Tis supposed that nearly a hundred or more of Mother Shaw’s relations and friends frequented the house all the time from her first complaint.”⁵⁴ In July, however, Bowen does call for Dr. Jackson after his son falls ill:

This day I was confined at home with my son Nathan. At 10 o’clock before noon came Doctor John Lowell and his opinion was Nathan had not the smallpox but the chicken pox. At noon came Doctor Hall Jackson to see Nathan and declared he had the smallpox, and soon after the Selectmen came and removed him to his mother, which was at Ingalls’s almshouse as an hospital for that purpose.⁵⁵

While Bowen continually admonished Jackson, he nevertheless called him as a caretaker for his son, implying his recognition of his skill, trust in his ability, and a desire for professional expertise (particularly after he already called the local Harvard trained physician, Dr. Lowell.) His

⁵³ For more on the professionalization of medicine in colonial America, see Van De Wetering, “A Reconsideration of the Inoculation Controversy.”

⁵⁴ Bowen, 345.

⁵⁵ Bowen, 353.

frustration, then, with Castle Pox pointed not towards his distrust of inoculation or Jackson's qualifications, but his anger towards the hospital itself.

“Gentlemen and Ladies of the First Characters in the County”

While Hall Jackson and the proprietors had extensive documentation about their lives and their roles at Castle Pox, their story alone does not constitute the narrative. The patient experience is essential to understanding the relationship between the Marblehead riots and the institution of the inoculation hospital. Few medical records from the era exist (and even fewer discuss medical culture from the point of view of the patient). Although no patients who spent time at Castle Pox left a written record of their time there, there are numerous mentions of the institution throughout New England society. These documents—ranging from single mentions of Jackson's project to more extensive discussions of the institution—reveal the contemporary impressions about the patients who traveled to Essex Hospital and their differences from the Marblehead fishermen.

The journals of the Reverend Manasseh Cutler provide insight into the type of patient that was attracted to the Essex Hospital. Cutler, a Yale educated and Massachusetts based minister and teacher, helped draft the Ordinance of 1787 which created the Northwest Territory and served as a Federalist Congressman from 1801 to 1805. In 1773, Cutler's diary chronicled his travels in the surrounding Boston area, largely both to preach and to participate in local political meetings. On October 17, Cutler wrote that he was “very much alarmed at a remarkable breaking-out upon Parker Dodge, supposed to be the small-pox.” Following Dodge's death, Cutler set out for Essex Hospital from Beverly (a sizeable journey of around 10 miles) to be inoculated by Dr. Jackson.⁵⁶

⁵⁶ William Parker Cutler, Julia Perkins Cutler, and Ephraim Cutler Dawes, *Life, Journals and Correspondence of Rev. Manasseh Cutler, LL. D.* (R. Clarke & Company, 1888), 43.

Cutler's description of his short time at Essex Hospital revealed the rising tensions over the hospital. When Cutler and the rest of his party arrived at Essex Hospital, Jackson was unprepared to inoculate, but both he and Gerry "gave [Cutler] encouragement that he should have a berth." When he returned the next day, "the people, by this time arrived in several vessels from Marblehead, and thronged the Hospital." With this new added pressure, Gerry turned Cutler away. He wrote that "as I was not a signer [at this time, only those who had initially signed up to be inoculated were being treated], I had no right to plead for a berth, and presently found I could not be accommodated." Cutler's friends were admitted into the hospital as they were signers, but they were not from Marblehead either. The fact that Cutler was rejected by Gerry, rather than Jackson tells us how much influence the proprietors had over the hospital. Gerry's power to choose the patients was importantly exercised differently when the "townspeople" (as Cutler refers to them as) were observing. Gerry and Cutler were well-acquainted and worked closely together in the Continental Congress, and would continue to be familiar during their later roles in the early Republic. Cutler's insistence on traveling to Cat Island to be taken care of by Dr. Jackson underscored the doctor's fame in the region, particularly amongst the well-educated. Gerry's rejection of Cutler revealed the power of the proprietors to carefully curate their patient population and the tension inherent in their position. They were to serve as both regulators and marketers.⁵⁷

The published advertisements for the Essex Hospital reveal the proprietor's unusual relationship to the public and the patients. Beginning on October 12 of 1773, Gerry, Orne and the Glovers began submitting advertisements to the *Essex Gazette*. Each advertisement highlighted bold and enlarged font stating "the proprietors of the Essex Hospital" before their announcement. This emphasis on the proprietors' role in the hospital revealed the private and public nature of the

⁵⁷ Cutler, 43.

project. By underscoring their own managerial and financial role, the owners compared themselves to elected officials who similarly would begin announcements with the language “the Selectmen of Salem inform the public.” Advertisements for goods or private ventures, however, would bold the actual product or the seller rather than the position of the owner; in the October 12th edition, advertisements accentuate “choice Madeira wines” and “Bickerstaff and Stearn’s Almanacks.” Although imitating the notices from the public sector, the proprietors—as the owners and potential profit-makers—were additionally hoping to attract clientele. Their first promotion was directed simply to the “subscribers for the first class,” but the subsequent ads instead copied the selectmen’s address to “inform the public.” This change simultaneously expanded the accessibility of the service beyond the initial subscribers, increased the potential market base for the hospital, and ascribed (perhaps unearned) legislative authority to the proprietors as they mimicked the voice of the selectmen.

Salem Hospital—which was similarly opened in 1773 to inoculate against small-pox—advertised in a distinctly different manner. Salem’s institution was not privately owned, nor could it generate profit (although private, wealthier citizens did provide the original funding); even so, it did not claim either the universality or the authority that the owners of Castle Pox had. Their bulletin instead highlighted not the hospital itself, but instead simply alerted the subscribers to the availability of printed regulations: “Just published, and to be sold by the Printers of this Paper, RULES, for regulating Salem Hospital. The subscribers to the hospital are desired to call the printing-office for copies of the rule.” Despite being more a public institution than Essex Hospital, the Salem Hospital presented itself as a private service rather than an order from the selectmen.⁵⁸

⁵⁸ “Advertisement, October 12,” *Essex Gazette*, October 12, 1773, *America’s Historical Newspapers*; “Advertisement, October 26”; “Advertisement,” *Essex Gazette*, December 21, 1773, *America’s Historical Newspapers*.

The patients traveling to Essex Hospital were often not residents of Marblehead. While no exact record remains of those who enrolled at Castle Pox, one can begin to understand the type of patient that was treated through individual mentions. Cutler's friends—Dr. Elisha Whitney and Mr. Robert Dodge—were first subscribers to the hospital, but they did not live in Marblehead. The patients who were eventually driven out of Marblehead during the rioting were similarly not local residents. Rather than the hospital dividing the town between those who supported and were inoculated and those who were against it (like many of the other riots against smallpox inoculation), the tension was primarily between outsiders who had traveled to town for the procedure and the residents who could not afford the price of admission.

Ashley Bowen's diary included no details on who actually was a patient, but it included the names of all those he knew who had become naturally infected (and often died) of the smallpox. About a week after the first class was inoculated at Castle Pox on October 22, Bowen noted that "this morning died Elizabeth Parsons of smallpox," while "some children are sick of the measles at Cat Island." In the following days, Bowen noted the natural infection of "the wife of Sam Humphreys" and "George St. Barbe's wife," but spoke of those inoculated at Castle Pox only as "the volunteers," who he stated on October 31st as being "as good health as when they landed and in much better condition."⁵⁹ Bowen's anonymization of the Essex Hospital patients could be explained either by simple lack of knowledge (which would certainly indicate outsiders as the town of Marblehead itself was only 5,000) or by a purposeful dismissal of the group at large. Either way, for Bowen, there was a clear distinction between the townspeople—whom he regularly named and discussed—and the Castle Pox patients—who existed only as a group. On the arrival of the second class, Bowen did note that "Colonel Frye and his recruit all belong to Salem, of both

⁵⁹ Bowen, 364.

sexes and some of the finest does [women] that belong to Salem,” confirming that many of what Bowen called the “enockulation gentry” consisted of rich and beautiful outsiders. The name of the hospital—Essex Hospital, rather than Marblehead Hospital—illuminated the proprietors’ intent; the owners clarified that the institution would serve the entire county. The proprietors admitted to this, perhaps not realizing the incendiary nature of their comments, stating that the patients “were many of them gentlemen and ladies of the first characters in the county” in their later narrative.⁶⁰

Castle Pox stood in stark contrast to the typical medical care available to those in Marblehead. While cities like Philadelphia did have a thriving private medical scene, New England towns primarily relied upon individual medical practitioners to take care of the sick. In both cases, local government could provide some regulation and funding for the poor. Essex Hospital interestingly fit neither of these established systems, but instead operated as a private corporation with a nominally public mission whose investors and patients resisted any regulation. This private hospital, importantly, did not exist to serve the general population of Marblehead (although that was its official and initial claim), but instead attracted elites from the surrounding area through its status and prestige. The proprietors saw this state-of-the-art facility with esteemed patients and a famous doctor as an essential improvement to the growing city of Marblehead. As it became increasingly clear that the patients would not abide by regulations, the townspeople chafed at the health risks that accompanied the proprietors’ pursuit of medically progressive work.

⁶⁰ Bowen, 370.

Chapter 3: Burning Castle Pox

“The Savage Mobility”

In November 1773, Salem’s new hospital opened, weakening Castle Pox’s claim that it served the public interest. In the *Essex Gazette* on November 9, the Salem selectmen announced both the indisputable “utility of this discovery [inoculation]” and the political difficulties of implementing inoculation (to avoid burdening the poor with a public expense, while still providing protection for them). “We have the Pleasure to inform the Publick, that these Difficulties are all avoided,” the selectmen proclaimed. Perhaps aware of the tensions in Marblehead over Castle Pox, they announced that “One Thousand Pounds lawful Money has been raised by Subscription, for the erecting furnishing an inoculating Hospital, which is to be entirely under the Regulation of the Town.” The subscribers would be paid back without interest, and the Selectmen promised to cap the fees for individuals to ensure accessibility.⁶¹

Salem hired Dr. James Latham, a doctor who advocated for the Suttonian method of inoculation, invented in England in 1763. Latham claimed that this new procedure was safer, less infectious, and easier, as it injected the virus into a much smaller incision made by a lancet. The Suttonian method also included a special prescription for a secret medicine; the concoction clearly contained mercury, evident to eighteenth-century patients and doctors from the obvious symptoms of mercury poisoning. Despite this, the Suttonian method flourished, and a large group of doctors in both the colonies and England heralded the technique. Whereas Jackson was well known for his skill, Latham was instead a disciple of a methodology. While the Marblehead proprietors chose to invest in Jackson as an individual, Salem invested in a school of medical thought. As a privately run hospital (controlled not by the town nor the health care provider but by its investors), Castle

⁶¹ “Salem, November 9,” *Essex Gazette*, November 9, 1773, America’s Historical Newspapers.

Pox disrupted the culture of public medicine that undergird early American medicine. Trusting themselves as private investors, the proprietors prioritized the physician's pedigree and reputation, rather than the methodologies he subscribed to.⁶²

December 1773 marked an important turning point for the American Revolution: The Boston Tea Party. Allowing lower-taxed tea from the East India Company to be sold in the colonies, the British government sparked outrage not just in Boston but throughout the region. On December 7th 1773, Marblehead held a town meeting in which several resolutions were unanimously passed. The town agreed that “that Americans have a right to be as free as any inhabitants of the earth, and to enjoy at all times an uninterrupted possession of their property” and that Marbleheaders were ready with “their lives and interests to assist them in opposing these and all other measures tending to enslave our country.” Despite increasing internal divisions, Marblehead was united against the alleged tyranny of the British.⁶³

At the same time that resistance towards the British was cementing, the Marblehead proprietors began to face increasing criticism. Patients began leaving earlier than the allotted isolation period, visitors traveled to and from Castle Pox, and infected clothing left the island—all of which could spread the disease. In December, while the third class of patients began their stay, the town saw a renewed outbreak of smallpox cases. Marblehead residents called a town meeting for December 27. Not only was Castle Pox not accessible, they said, but the relaxation of its quarantine was increasingly a danger. While there had been obvious discontent with the early

⁶² Arthur Boylston, “Daniel Sutton, a Forgotten 18th Century Clinician Scientist,” *Journal of the Royal Society of Medicine* 105, no. 2 (February 2012): 85–87, <https://doi.org/10.1258/jrsm.2012.12k001>.

⁶³ Roads, 95-96.

exclusivity of Essex Hospital, the potential catastrophe of a smallpox epidemic marked a turning point. This elective procedure was now leading to deadly infections among the townspeople.

At the town meeting, the selectmen agreed that the hospital needed more regulation to keep the town safe; patients were to remain on the island for thirty full days (twenty-one was the longest that earlier ones had remained); ships to and from the hospital were only allowed to dock at specific ports; and non-Marblehead residents were no longer to be accepted. As had been common throughout the eighteenth century, the town meeting and the selectmen directed public health. In 1730, Marblehead had issued misguided decrees restricting the movement of indigenous peoples and black slaves when the town was threatened with smallpox. That same year, they agreed that no one would be inoculated unless the whole town had the treatment. The town took the 1773 outbreak just as seriously and expected similar cooperation.

Tensions continued to build after the passage of the new laws, however. The proprietors chafed at these restrictions, arguing that their actions should not be restricted by the town as a privately-run operation and claiming these rules were “illegal and improper.” The proprietors believed that they knew how best to protect the town, stating that if the new set of laws “appears to the public reasonable or just” that the owners “have very inadequate ideas of right and wrong.” The ordinary citizens of Marblehead knew the necessity of proper protocol to protect public health, but the proprietors prioritized continuing the operation of Essex Hospital. Whether the foursome was interested in making more money, sincere in their belief that regulations would not change the infection rate, or adamant that the long-term benefits of the hospital would outweigh a few new cases, Gerry, Orne, and the Glovers pressed their paternalistic understanding of public health on the townspeople. Insisting that their private hospital should not be subject to public management,

the proprietors refused to honor the town's vote. As investors, they implied they did not have to follow majority rule.⁶⁴

The proprietors' spurning of the restrictions was coupled with insubordinate acts by the Castle Pox patients which further enraged the townspeople. One family left at twenty-five days rather than thirty and hospital boats continually docked at unauthorized ports where working sailors could be unknowingly exposed. The *Essex Gazette* wrote that "we learn from Marblehead, that considerable Disturbance arose in that Town" in which a hospital boat, carrying the recently released patients, was "beat or pushed them off two or three Times" by a "considerable Number of the Inhabitants." While that boat was forced to dock at its designated location and a crowd traveled to Castle Pox to complain about the transgression, another vessel attempted to do the same the next day. The continued repudiation of the townspeople's concerns illustrated the problems with a private inoculation hospital: it inherently affected the public, but they had no avenue for redress. The proprietors seemed unwilling to restrict the patients, as they were businessmen hoping to keep clients happy rather than government officials entrusted to maintain public health or doctors concerned with the health of their patients.

On the night of January 18, 1774, a mob gathered to burn the boat and then traveled to the house of the family who left Cat Island early. "Plied by a few persons with strong liquors," the group "blacked themselves," and declared "their intentions to have [the sheriff and the gentlemen] put to a most excruciating death...by boiling them in oil." The mob eventually realized the family had fled after the controversy the day before, but their anger continued to increase. The proprietors wrote "that day, after day, the disorders increased" until January 15th when they decided to evacuate all Castle Pox patients. The current class fled the island, leaving it uninhabited and

⁶⁴ Gerry et al., "A Narrative of the Late Disturbances at Marblehead."

abandoning their belongings including much of their clothing. Those fighting against the hospital seemed to have won, since the immediate danger of an epidemic had gone.⁶⁵

The mob's role, despite the patients' escape, was not finished. On January 17, five men traveled back to Cat Island, and several of them stole the deserted, smallpox-infected clothing with the intent of infecting the town to further inflame the townspeople. Disturbed by the shockingly reckless act, the rest of the mob quickly turned on the thieves. Azor Orne apprehended the thieves, a crowd promptly "tarred and feathered [them] in the modern way" and paraded the men from Marblehead to Salem, a distance of four and half miles. The *Essex Gazette* wrote that the "exquisitely droll and grotesque Appearance of the four tarred and feathered Objects of Derision, exhibited a very laughable and truly comic Scene." Despite the momentary alliance of the rioters and the proprietors in mocking the thieves, protests and disorder continued to reign in Marblehead.⁶⁶

Rioters continued to assemble. On the 21st of January, they traveled throughout town "proclaiming in a body of not less than *seven or eight hundred men* 'that they had the laws in their own hands; that all liars against the Essex Hospital should be punished in the same way; that all persons saying anything against their proceedings should be punished in the same way' [emphasis added]." Almost 1/5 of the town continued to shout that "they had the laws in their own hands" despite the absence of any inoculated patients. The proprietors would later state that the town was "in a perfect state of anarchy and confusion," but the townspeople were importantly declaring their political authority rather than hoping to institute chaos. The extraordinary number of protestors

⁶⁵ "Salem, January 18," *Essex Gazette*, January 18, 1774, *America's Historical Newspapers*; Wehrman, "The Siege of 'Castle Pox,'" 410; Gerry et al., "A Narrative of the Late Disturbances at Marblehead."

⁶⁶ "Salem, January 25," *Essex Gazette*, January 25, 1774, *America's Historical Newspapers*.

found that violence was the most effective political method.⁶⁷

As mobs continued to tar and feather more men, the selectmen finally called a town meeting for January 24th. The town voted to close Essex Hospital, even though its patients had all already fled. The consolation of the end of the hospital, however, was undermined by the outbreak of twenty-two new cases of smallpox. Two days later, around twenty “Rufians, who perpetrated this Act, went from the Town prepared with Tar Tubs, &c. and proceeded setting Fire to all parts of the House.”⁶⁸ The rioters did not awaken the three men who had volunteered to clean the hospital and had brought their families with them. All of them escaped safely.

Despite the burning of the hospital, residents continued to threaten more violence in the following weeks. Despite his disdain, Elbridge Gerry wrote the royal governor requesting military intervention. The Massachusetts Governor sent some forty men and instituted a military watch.⁶⁹ Sam Adams was later infuriated by Gerry’s decision to associate with a royal authority over the people of Marblehead. He argued that “our Enemies” will find “a kind of Tryumph in finding that the Friends of Liberty themselves were oblig’d to have recourse even to military Aid.”⁷⁰ Sailors and fisherman had led the rest of the residents in protest and riot, perhaps adding to the public divisions that concerned Adams.

Rather than working as agents of anarchism or anti-authoritarianism, the Marblehead protestors hoped to establish their authority. Colonial mobs were often motivated to enforce, not disrupt, order in the eighteenth century. The historian Pauline Maier wrote about the specific role

⁶⁷ Gerry et al., “A Narrative of the Late Disturbances at Marblehead.”

⁶⁸ “Salem, February 1,” *Essex Gazette*, February 1, 1774, America’s Historical Newspapers.

⁶⁹ Bowen, “The Siege of ‘Castle Pox,’” 412.

⁷⁰ Samuel Adams to Elbridge Gerry, March 25, 1774, The Gilder Lehrman Collection, The Gilder Lehrman Institute of American History, New York, accessed March 28, 2020. <https://www.gilderlehrman.org/collection/glc01213>.

of the mob in colonial America as “an extralegal arm of the community’s interest,” particularly in the context of epidemics. Quite literally, the residents believed the mob would protect their interests as a community more than the selectmen had done with Castle Pox. This included, of course, the forced compliance of the proprietors to follow their voted upon regulations. Reminiscent of the 1730 riots, the Marblehead townspeople formed a single body to resist those threatening the public health. They used the health crises to define and underscore their agency within local governance.⁷¹

Aftermath

After a military watch had been instituted, tensions slowly dissipated and the community (and the rest of the colonies) were left to grapple with the lessons of Essex Hospital. By mid-February, the proprietors petitioned the General Court to mount a formal investigation. On February 15, a committee arrived in Marblehead to interview its residents. Much to the dismay of Gerry, Orne, and the Glovers, the investigators ultimately sided with the rioters. They noted that “the poorer sort, of which the majority of the town is composed” were justified in their belief that “the regulations of said hospital were not duly attended to.” They continued to state that “by a prevailing apprehension and perhaps satisfactory proof,” the townspeople believed that they were “at the great hazard of their lives” due to the spreading of smallpox from the hospital to the town. They concluded that while “the hospital was at first set up on principles of public utility” there had been “considerable uneasiness” that was not adequately addressed, allowing the order of the town to implode. While the report in many ways handed the townspeople a victory, its acknowledgement

⁷¹ Maier, “Popular Uprisings and Civil Authority in Eighteenth-Century America,” 5.

of the proprietors' negligence deeply bothered leaders at the forefront of the Revolutionary cause. The four proprietors were left to make sense of this accusation and their failing.⁷²

Frustrated by the report, Gerry, Orne, and the Glovers sought further justice, but their attempt only fueled the existing anger in Marblehead. Two rioters were arrested, but the proprietors hoped for further repercussions. On February 25, the *Essex Gazette* reported that "the Deputy-Sheriff, went on board a fishing Vessel" to arrest John Watts and John Guillard "in an Action of Damages for 3000 [pounds], commenced by the Gentlemen who were Proprietors of the late Essex Hospital, on Suspicion that the said two Persons were concerned in burning that Building." The arrest of the men, however, immediately sparked community action. "Almost as soon as the Keys were turned upon them, the People began, in small Companies" to leave for the Salem jail where the mob confronted the militia, "burst open the Doors," "then, with Iron Crows, Axes &c. they soon beat their Way through four of the Prison-Doors," and "carried off the abovementioned two Prisoners in Triumph." The following day, Bowen concluded that "the Proprietors of Essex Hospital buried the hatchet forever," after the crowd forced the foursome to agree to drop the charges. The sheriff, however, called up five hundred men to take back Watts and Guillard, but they were confronted by up to a thousand armed Marblehead men. The sheriff backed down, giving the crowd its final victory.⁷³

On the 7th of March, the Salem hospital also closed. It was reported that "the inhabitants of Salem vote that the inoculation at their hospital be discontinued, [and] the town reimburse the proprietors of the hospital." While the riots in Marblehead certainly influenced the closure, they were not reported as the primary cause. Instead, the annals reported that Dr. Latham's "Suttonian

⁷² Gerry et al., "A Narrative of the Late Disturbances at Marblehead."

⁷³ "Marblehead, March 8"; Bowen, 386–87; Wehrman, "The Siege of 'Castle Pox,'" 415–17.

method of treating the small pox, was by mercurial, and that his patients had not done so well as those of American physicians.” A long tract was published in the *Essex Gazette* on March 15th by “a lover of truth” who accused Dr. Latham of malpractice and being “an arrogant pretender”, stating that the doctor “has often cut across the fibrous, muscular flesh, and thereby some of his patients are in the utmost hazard of losing at least partial use of their arms.” Celebrating the efficacy of the burned hospital’s doctor, the writer wished that Dr. Latham’s patients would have “the Small-Pox merely as lightly as those of Dr. Jackson and other Americans.” Interestingly, the critiques of Dr. Latham—in addition to his use of mercury—rested on the inferiority of a British inoculation to the American practice. Despite the inaccessibility of Castle Pox and the recklessness of its patients, Dr. Jackson defined the American method of inoculation. With the closure of both the Salem and the Marblehead hospital, the public emphasized that the ideal medical practice would be widely accessible, well regulated, and informed by American expertise.⁷⁴

For the proprietors, Castle Pox underscored concern about the tyranny of the mob and refined their beliefs about what republicanism constituted. In April 1774, following the release of Watts and Guillard, the foursome resigned from the local Committee of Correspondence. Their letter to “Sam Adams and the Boston Committee of Correspondence” poignantly compares Marblehead to an infected body. They wrote that a “late prevalent disorder have put an End in this place to all Order & Distinction,” leaving them under the attack of “a savage Mobility.” If there had been adequate government, they wrote, “we presume [the problem] would be effectually cured,” the mob would have been “reclaimed from their lawless outrage,” and “the wicked abettors

⁷⁴ “To the Public,” *Essex Gazette*, March 15, 1774, America’s Historical Newspapers; Joseph B. (Joseph Barlow) Felt and Israel Thorndike Pamphlet Collection (Library of Congress) DLC, *The Annals of Salem, from Its First Settlement* (Salem, W. & S.B. Ives, 1827), <http://archive.org/details/annalsofsalemfro00jose>.

must have been openly convicted.” They charged that an unfit government had allowed the problem to fester, fatally infecting the town. For this reason, the four merchants declared they could no longer publicly serve Marblehead. Republican governments, in their newly-shaped political understandings, could only exist with a deserving and able populace. As ordinary Marbleheaders resisted the authority of the proprietors, the codfish aristocracy increasingly saw themselves as separate from the rest of the town’s citizens. Beyond revealing underlying tensions within the community, Castle Pox created them—reminding the “enockulation gentry” that they did in fact have different interests than their poorer neighbors. The proprietors would later blame the “weak state in which government then appeared to be in this part of the country” for the lack of justice.⁷⁵

As an epistemic crisis, Castle Pox revealed the proprietors’ philosophy of medicine and healthcare. They trusted Jackson as an individual to enhance their health, proactively protecting them from smallpox. They asserted that health care, as an avenue for both individual and communal improvement, should be relegated to the private sector. The 1721 inoculation controversies had illuminated the new understandings of and possibilities for medicine and scientific inquiry. The 1774 riots, rising out of a class-stratified society on the brink of revolution, revealed that these practices required public regulation. Because knowledge of disease was (and is) inherently limited, scientific inquiry alone could not decide public health policy. Instead, local government needed to dictate when, how, and to whom new treatments could be implemented. After the Castle Pox crisis, the merchants insisted that the educated should make these political

⁷⁵ “Marblehead Committee of Correspondence to Boston Committee of Correspondence,” March 22, 1774, Boston Committee of Correspondence records, Manuscripts and Archives Division, The New York Public Library; Gerry et al., “A Narrative of the Late Disturbances at Marblehead.”

and medical decisions, as they had enlightened understandings of both science and republicanism. They could advance Marblehead society and politics only if the townspeople acquiesced. The evident animosity seemed to force the investors to realize that their vision of medicine and republicanism was incompatible with the masses. They concluded that this difference indicated inherent, untreatable flaws in the public.

The Boston Committee of Correspondence pleaded with the proprietors to return to their positions, largely concerned with how their resignations would be perceived by the larger public. Noting how the incident could be used by their enemies to demonstrate the unruly nature of democratic rule, the Committee wrote that they were “concerned that the minds of the zealous friends of the good cause” would “become thereby disaffected.” Particularly in light of Gerry’s previously public and adamant criticism of Governor Hutchinson for the use of militia to quell mob violence, the Committee worried that the proprietors’ response would show tyrannical tendencies similar to the ones he had recently condemned. The investors, however, were insistent that they were the proponents of liberty, defending the American cause against the unruly public.⁷⁶

Elbridge Gerry, in particular, was shaped by this violence. Separately from the rest of the committee, Gerry wrote to his mentor Sam Adams that the “Cause of American Liberty” was threatened by Castle Pox, stating that “here happens an Accident that pleads the Necessity of securing It [liberty] Internaly” more so than British tyranny. For Gerry, American freedom was subject to destruction both by their rulers—the British—and those who should be ruled—the townspeople. The so-called Smallpox War momentarily relegated the external threats to freedom to the backstage in Gerry’s mind; the “savage Mobility” of Marblehead, instead, seemed to be the

⁷⁶ “Boston Committee of Correspondence to Marblehead Committee of Correspondence,” April 2, 1774, Boston Committee of Correspondence records, Manuscripts and Archives Division, The New York Public Library; Wehrman, “The Siege of ‘Castle Pox,’” 422–23.

greatest danger to the realization of republicanism in Massachusetts. Adams was more concerned about Gerry's own turn from democratic values than the unruly Marblehead mob. Adams wrote that he was "loath to believe, nay, I cannot yet believe, that the Gentlemen of Marblehead, who have born so early and so noble a Testimony to the Cause of American Freedom, will desert that Cause, only from a Difference of Sentiments among themselves concerning a Matter which has no Relation to it." Not only was Gerry insistent on the corruptibility of people in general, he began delineating between "gentlemen" and the "mob." Adams asserted that this was a disagreement amongst Marbleheaders, but Gerry wanted to differentiate between the masses and the elite who wanted to do public good. The episode would lead Gerry to advocate for indirect elections to protect the republic from the rule of the mob. Just as the townspeople assert their rights as a distinct polity, Gerry became more fearful of their agency ⁷⁷

That same month, Britain passed the Boston Port Bill, the first of the "Intolerable Acts." As a response to the British Tea Party, the Boston harbor was to be closed after June 1774 until the town had compensated the East India Company for the tea it had destroyed. Further, the Crown transferred the customs house to Marblehead until Boston could be effectively taxed. Marblehead merchants were primed to capitalize on the closure of Boston's ports, potentially making a huge profit off of the redirected trade. While Marblehead had long displayed its resistance to tyrannical British laws, the recent internal turmoil undermined the town's commitment. As Gerry articulated, the proprietors were increasingly concerned about their own neighbors infringing on their liberties and less devoted to resisting the British.

⁷⁷ George Athan Billias, *Elbridge Gerry, Founding Father and Republican Statesman* (New York: McGraw-Hill, 1976), 39.

Marbleheaders, however, were actually quite united in their resistance towards the British. Perhaps inspired by their recent display of political power in their successful closure of Essex Hospital, the townspeople quickly moved to fill the role of revolutionary leaders once the proprietors had resigned. On May 23 1774, a new Committee of Correspondence was chosen and the town voted to “adopt any other measures that may appear to be constitutional, and calculated to procure relief from the difficulties which are hastening in all the colonies of America.”⁷⁸ That warrant led to forty-six town meetings on the same topic within the next ten months, indicating the strength of Revolutionary interest. This proclamation enjoyed wide support, including from Ashley Bowen who stated “This day a Town Meeting. About time. What they have done you will find in the Salem paper.”⁷⁹ Support for Boston continued in the following months, including the loaning of storerooms and wharves, an endorsement of Boston’s own resolution, and charitable drives to aid the Boston poor. Sam Adams even convinced Elbridge Gerry to join and lead many of these ventures, despite his vehement protestations earlier.⁸⁰

On May 21, the foursome publically published their account of the riots as a special issue of the *Essex Gazette*, entitled “A Narrative of the late Disturbances at Marblehead.” They wrote “To the Public” that they hoped “the late disturbances in this place may be rightly understood as well as undue impressions of them be removed.” Just as the investors began to reemerge as advocates for American freedom, they submitted a defense of their actions. Calling the criticisms “cruel insinuations,” they insisted that the public should not “abate the criminality of the act of burning the hospital” and hoped that “a few persons of malicious and wicked principles” will be revealed to have “disturb[ed] and prejudice[d] the minds of the people against the institution.”

⁷⁸ Roads, 97.

⁷⁹ Bowen, 395.

⁸⁰ Billias, *John Glover and the Marblehead Mariners*, 51.

“We shall consider the steps of the opposers unitedly,” they acknowledged, despite their longing for only a few to be ultimately responsible. Whereas their initial response to the riots had been appeals to the authority of both the Royal Governor and Samuel Adams, the owner’s public defense illuminated their growing recognition of the majority’s political independence. Instead of certainty that the masses were corrupted by a few, the proprietors conceded that the protestors remained unified in their anger. The public, rather than being swayed from the truth, had simply been wrong. Revealing the need for the narrative’s publication, the proprietors wanted to convince the townspeople—the political body they were now beholden to—of their righteousness. At the same time, however, the group emphasized the public’s fallibility. The public, the foursome contended, had authority in the realm of public health, but it had proved themselves to be abusive and anarchical.⁸¹

Revolutionary spirit soon drew the proprietors back into leadership roles. In the summer of 1774, the town met to vote for its representative to the Continental Congress occurring in September. Azor Orne and Elbridge Gerry were two of the three nominated, but all initially declined the honor. At the next meeting, however, Gerry accepted the position and traveled to Philadelphia as Marblehead’s delegate. Whether overcome by patriotism or self-interest, Gerry acquiesced to the town’s request and continued to be an important figure in American politics, serving on the Continental Congress. Congress agreed upon a boycott of British goods and established local Committees of Inspection to ensure its adoption. John Glover joined the Committee in November of 1774. By December, Jonathan had joined as well. Only about nine months after the group had resigned from the Committee of Correspondence, all four had taken on new roles as representatives. The frustrations over Essex Hospital continued through the

⁸¹ Gerry et al., “A Narrative of the Late Disturbances at Marblehead.”

Revolutionary War. In December of 1777, both Glovers hired a Boston lawyer to sue one of the alleged culprits, stating that “while you imagined they [the Glovers] were asleep, have been Collecting that Evidence which will fully establish the Charge against you & they are determined to pursue it to the last Extremity.” Four years after the hospital’s destruction and after the Declaration of Independence, the Glovers still hoped to redress the wrongs of the riots. Despite their insistence, no resolution was ever reached.⁸²

The citizens of Marblehead were also swept up in the Revolution. Nearly 39 percent of the adult male population in Marblehead served during the Revolution, dwarfing the typical rates for similar communities which ranged from 22 to 35 percent.⁸³ When John Glover became the leader of the Marblehead militia, his unit, the Twenty-First regiment in the American army, contained 505 members, only seven of whom were not from Marblehead.⁸⁴ He eventually was reassigned to the Fourteenth regiment which was not wholly Marbleheaders, but, under Glover’s leadership, it was similarly referred to as the Marblehead unit. They were fittingly known for their sailing skills and were regularly assigned to sea-faring missions; the unit led George Washington and his army to cross the Delaware River on December 26, 1776. John Guillard—one of the men the proprietors had served with a charge of trespassing—surprisingly served under Glover.

Despite continual pursuit of some of the perpetrators, the proprietors did move past their initial frustrations with the townspeople and the riots of Castle Pox, evidenced by their willingness to serve as Marblehead representatives. The town’s readiness, however, to elect them and serve under them was similarly revealing. While they had questioned their authority on public health matters and specifically on Castle Pox’s regulation, the townspeople were not fundamentally

⁸² Searle, “History of Catta Island Off Marblehead,” 336.

⁸³ Magra, 28.

⁸⁴ Billias, *Elbridge Gerry*, 66.

questioning their political influence. The codfish aristocracy would continue to dominate Marblehead's local government.

While the vigor and regularity of mob violence might have indicated Marblehead's capability for revolution, these actions were not extensions of anti-British thought. Instead, Marblehead mob actions largely worked to establish public safety and accessible healthcare. Marbleheaders formed a mob twice to combat the endangerment of the town due to smallpox and inoculation. In contrast, the Intolerable Acts and increased taxation on both fishermen and merchants led to the formation of formal avenues of redress: organized boycotts, formations of Committees of Correspondence and lawsuits against the Crown.

The events continued to disturb leading politicians, even after Marblehead itself had returned to normalcy. In his letter to Gerry, Sam Adams first articulated that Castle Pox was unrelated to American democracy. While his letter hoped to convince Gerry to rejoin the Committee of Correspondence, Adams also was aware of how the event would appear to "our Enemies." He continued noting, however, that there was a distinction between a "lawless Attack upon Property" and "the People rising in the necessary Defense of their Liberties, and deliberately and I may add rationally destroying Property, after trying every Method to preserve it, and when the Men in Power had rendered the Destruction of that Property the only Means of securing the Property of All." Despite his earlier conclusion that the riots were unconnected to the American cause, Adams hinted at his sympathy for the Marblehead fishermen. Ultimately faced with conflicting loyalties, Adams decided that the riots had little connection to either democracy or the revolutionary spirit.⁸⁵

⁸⁵ Adams to Gerry, March 25, 1774.

Adams' solution was furthered by his cousin John. Adams wrote under the pseudonym Novanglus that "the hospital at Marblehead is another instance, no more owing to the politicks of the times, than the burning of the temple at Ephesus." He continued that "the principles and temper of the times had no share in this" and that "such incidents happen in all governments at times." Adams hoped to ensure that the Whigs were not blamed for inciting the violence. Interestingly, Adams acknowledged that the hospital was built "much against the will of the multitude" and that the "patients were careless, some of them wantonly so." Both John and Sam Adams had to justify the actions of the mob, while denying that the riots were indicative of the future of American government.⁸⁶

People, however, are not often their era's best historians. Unable to adequately grapple with the conflict's implications, the Adams asserted that the debate over governance had nothing to do with the future republic they were promoting. They could not see the degree to which healthcare was and would remain a fundamental part of American political debate. While unified by patriotic fervor, Marbleheaders were riven by deep and seemingly irresolvable conflicts over how the community should attend to public health. Essex Hospital revealed that the commodification of health care, while lucrative and enticing, only intensified the vulnerability of the working classes. The health of the body politic, after all, is dependent on the whole populace, not just the wealthy and educated. The Adams could not recognize this at the time, but later generations of activists and historians can look upon the riots against Essex Hospital in eighteenth-century Marblehead as a critical articulation of the tensions that would haunt the future republic for centuries to come.

⁸⁶ John Adams, "Novanglus, and Massachusettensis," accessed February 23, 2020, <https://www.gutenberg.org/files/45205/45205-h/45205-h.html>; Adams to Gerry, March 25, 1774.

Conclusion

They enter the new world naked,
Cold, uncertain of all
save that they enter. All about them
The cold familiar wind-

Now the grass, tomorrow
The stiff curl of wildcarrot leaf
One by one objects are defined—
It quickens, clarity, outline of leaf

But now the stark dignity of
entrance-Still, the profound change
has come upon them: rooted, they
grip down and begin to awaken –William Carlos Williams, “Spring and All,” 1923

Following the example of John and Sam Adams, the Castle Pox riots were ignored during the early Republic. During the early nineteenth century, as Americans were shaping, mythologizing, and curating a national identity, they were likewise reinterpreting medical culture. Hall Jackson became instrumental in the introduction of another medical advancement to the United States, the herb purple foxglove which was effective in curing dropsy (now referred to as edema). His implementation of the drug was part of a larger medical shift to evidence-based medicine in both the United States and in Europe. In 1798, the British doctor Edward Jenner invented vaccination, an effective way to create smallpox immunity without being infected with the live virus.⁸⁷ This much safer procedure relegated inoculation controversies—and their larger political implications—to the past (although vaccination, of course, has again become controversial).

At the same time, American medical practitioners were establishing and joining local medical institutions—and creating new narratives about the history of American medicine. The

⁸⁷ Kass, “Boston’s Historic Smallpox Epidemic,” 39.

Massachusetts Medical Society was founded in 1781. Just as Rush declared that the “people here rule in medicine as well as government,” American doctors began discussing the accomplishments of eighteenth-century Americans in the medical sciences. In 1810, the society held its sixth Annual Oration in which the New Hampshire doctor Josiah Bartlett discussed “the progress of medical science in the commonwealth of Massachusetts.” He celebrated the “patronage of Cotton Mather, a celebrated divine,” “Zabdiel Boylston, of whom we may boast as the earliest inoculator for small pox in the British dominions,” and the inoculating hospital “in the neighbourhood of Marblehead, under the direction of Hall Jackson, from Portsmouth.” Bartlett de-radicalized Marbleheaders’ response to Castle Pox, reincorporating Essex Hospital as part of the narrative of American progress. Despite the great struggle of the Marblehead fishermen to assert the importance of their right to accessible and safe health care, the proprietors were ultimately successful in painting Marblehead as a patriotic town on the cutting edge of medical advancement.⁸⁸

Epidemics do not affect all people equally. Particularly in a class-stratified society like Marblehead, health crises terrorize the majority and often only threaten the wealthy minority—those who have access to the best treatments and care. As one of the first private hospitals in the colonies, Castle Pox revealed how ruling class negligence could endanger the masses that were vulnerable to infection and inadequately protected. The townspeople began to recognize that each individual’s health impacted the whole. The coalesced into a singular political body, ready to assert their power and agency.

The proprietors became keenly aware of how this body could threaten them directly through both the destruction of their property and reduction of their political power. The actions

⁸⁸ Josiah Bartlett, “Annual Oration 1810: A Dissertation on the Progress of Medical Science in the Commonwealth of Massachusetts” (Massachusetts Medical Society, June 6, 1810).

of the masses endangered their own liberties and their ability to use their private property to protect their individual health. In a society on the brink of revolution, this assertion of political power had especially powerful consequences. On reflection, the proprietors chose to qualify their vision of government rather than embracing the necessity of accessible and regulated medicine. Republicanism, they believed, could be equally damaged by external tyranny and by the internal “savage mobility.”

Castle Pox, like all health crises, revealed the public’s fragility and their power, directing the collective to act and to protect themselves. The clear recklessness exhibited in Marblehead necessitated restricting Castle Pox by any means possible. But the conflict over how to manage public health during epidemics continued and continues to disturb American society. If one at least hopes the “people here rule in medicine as well as government” as Rush asserted, how does society decide who constitutes the people? How do doctors implement new cures, often either dangerous or limited in supply? How does the government decide the extent to which commerce should determine health care? For at least a moment, the fishermen of Marblehead asserted that these decisions should and would be made by the people themselves.

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