Did the U.S. Army Distribute Smallpox Blankets to Indians? Fabrication and Falsification in Ward Churchill’s Genocide Rhetoric

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Abstract

In this analysis of the genocide rhetoric employed over the years by Ward Churchill, an ethnic studies professor at the University of Colorado, a "distressing" conclusion is reached: Churchill has habitually committed multiple counts of research misconduct--specifically, fabrication and falsification. While acknowledging the "politicization" of the topic and evidence of other outrages committed against Native American tribes in times past, this study examines the different versions of the "smallpox blankets" episode published by Churchill between 1994 and 2003. The "preponderance of evidence" standard of proof strongly indicates that Churchill fabricated events that never occurred--namely the U.S. Army's alleged distribution of smallpox-infested blankets to the Mandan Indians in 1837. The analysis additionally reveals that Churchill falsified sources to support his fabricated version of events, and also concealed evidence in his cited sources that actually disconfirms, rather than substantiates, his allegations of genocide.

All historians believe in honoring the integrity of the historical record. They do not fabricate evidence. Forgery and fraud violate the most basic foundations on which historians construct their interpretations of the past. An undetected counterfeit undermines not just the historical arguments of the forger, but all subsequent scholarship that relies on the forger’s work. Those who invent, alter, remove, or destroy evidence make it difficult for any serious historian ever wholly to trust their work again. American Historical Association’s Statement on Standards of Professional Conduct.1

So, I glad-handed things a bit. Mea culpa. Ward Churchill, on his smallpox blanket narrative.2

Introduction

Ward Churchill tells a shocking tale of war crimes committed by the U.S. Army at Fort Clark against the Mandan Indians in 1837. Fort Clark stood perched on a windswept bluff overlooking the Missouri River, in what is today North Dakota. Churchill reports that in early 1837, the commander of Fort Clark ordered a boatload of blankets shipped from a military smallpox infirmary in St. Louis. When the shipment arrived at Fort Clark on June 20, U.S. Army officers requested a parlay with Mandan Indians who lived next to the fort. At the parlay, army officers distributed the smallpox-infested blankets as gifts. When the Indians began to show signs of the illness, U.S. Army doctors did not impose quarantine, but instead told the Indians to scatter, so that the disease would become more widespread and kill more Indians. Meanwhile, the fort authorities hoarded smallpox vaccine in their storeroom, instead of using it to inoculate the Indians.

Every aspect of Churchill’s tale is fabricated. Between 1994 and 2003, Ward Churchill published at least six different versions of this accusation against the U.S. Army. While the Mandans and other Indians of the Upper Plains did suffer horribly from a smallpox epidemic in 1837, Churchill presents no evidence whatsoever to indicate that the infection was anything but accidental, or
that the U.S. Army was in any way involved. Fort Clark was a privately owned fur trading outpost, not a military base, and there were no U.S. troops in the vicinity. The closest U.S. military unit was an eight hundred mile march away at Fort Leavenworth.

In telling his fantastic tale, Churchill has fabricated incidents that never occurred and individuals who never existed. Churchill falsified the sources that he cited in support of his tale, and repeatedly concealed evidence in his possession that disconfirms his version of events.

Ward Churchill is currently a Professor of Ethnic Studies at the University of Colorado. The university granted Churchill tenure in 1991 in spite of the fact that he lacks a Ph.D. and had not served the normal probationary period as an untenured assistant professor. Churchill holds a M.A. degree in Communications from Sangamon State University. Documents from the University of Colorado archives indicate that Churchill obtained his tenured position there under a program designed to “recruit and hire a more diverse faculty” (Clark, 2005).

In early 2006, the University investigated Churchill on seven allegations of research misconduct, one of which was Churchill’s smallpox blankets hoax.\(^3\) The committee unanimously found Churchill guilty on all seven counts, and the Chancellor has recommended his dismissal from the university.

Given the politicization of this topic, it seems necessary to acknowledge at the outset that far too many instances of the U.S. Army committing outrages against various Indian tribes can be documented. A number of these were explicitly genocidal in intent. It is not the intention of this author to deny that simple fact. However, as the eminent Cherokee sociologist Russell Thornton has observed of Ward Churchill’s fabricated version of the 1837 smallpox epidemic: “The history is bad enough—there’s no need to embellish it” (Jaschik, 2005). That the U.S. Army is undoubtedly guilty of genocidal outrages against Indians in the past in no way justifies Ward Churchill’s fabrication of an outrage that never happened.

What Really Happened?

The High Plains smallpox epidemic of 1837 has been analyzed by numerous historians. None of the previous histories have indicated any U.S. Army presence in the vicinity, much less any military involvement in genocide. None have mentioned a word about a boatload of blankets shipped from a military smallpox infirmary in St. Louis. None have mentioned any medical personnel as even being present in the vicinity, much less deliberately violating quarantine by sending infected Indians out among the healthy population.

Historians agree that smallpox was brought to the High Plains in 1837 aboard the steamboat St. Peter’s—which was owned by a fur trading company—as it made its annual voyage up the Missouri River from St. Louis, delivering goods to the company’s trading posts along the way. The disease followed in the steamboat’s wake, making its appearance among the southern-most tribes along the river before it spread to the Mandans at Fort Clark and tribes north (Connell, 1984; Ferch, 1983; Dollar, 1977; Hudson, 2006; Jones, 2005; Meyer, 1977; Pearson, 2003; Stearn & Stearn, 1945; Sunder, 1968; Thornton, 1987; Trimble, 1985; Trimble, 1992; Robertson, 2001).

Many eyewitness accounts of the 1837 epidemic have survived. None mention any U.S. Army presence in the vicinity of Fort Clark. Only two government employees were on board the St. Peter’s as it approached the Upper Missouri. Joshua Pilcher was the Indian Bureau’s sub-agent to the Sioux, Cheyenne, and Ponca (Sunder, 1968). Pilcher left the boat at Fort Kiowa, where he was posted, before the boat arrived at Fort
Clark. Pilcher’s letters to his superior, Superintendent William Clark, indicate that the disease was carried by a number of sick passengers on board the St. Peter’s. As Pilcher began to realize the magnitude of the disease, he took steps to quarantine as many of his Indian charges as possible. Pilcher wrote Clark in June 1837 and again in July, warning of the smallpox outbreak. Pilcher advocated to Clark that an extended vaccination program should be initiated to stem the epidemic. Pilcher noted of his vaccination plan that: “it is a verry delicate experiment among those wild Indians, because death from any other cause, while under the influence of Vaccination would be attributed to that + no other cause[.]” Still, he told Clark, “[I]f furnishd with the means, I will cheerfully risk an experiment which may preserve the lives of fifteen or twenty thousand Indians[.]”

William Fulkerson was the other Indian Bureau sub-agent on board. Under Fulkerson’s purview were the Upper Missouri tribes, from the Mandans at Fort Clark to points north. Fulkerson was the only federal employee who rode the steamboat all the way up and back down the river, and the only one to meet the Mandans at Fort Clark. There is no evidence at all that Fulkerson distributed any blankets to Indians. Fulkerson’s letters to Superintendent William Clark both before and after the trip complain that the government had not allocated funds for the annual annuity gifts to Fulkerson’s tribes. Clark’s accounting records bear this out.

Fulkerson corroborates Pilcher’s report of sick passengers on board the St. Peter’s. Fulkerson requested of the steamboat captain that he put the first man to come down with smallpox off the boat. Captain Pratte, who was a principal in the fur company that owned the boat, refused to stop or turn back because of the disease, for turning back would have interfered with his delivery of trade goods. That would have caused havoc with his business, and put his traders in danger from angry Indians who were counting on the trade goods. Thus the brunt of responsibility for the epidemic lies with Pratte, for refusing to cancel his trip upriver once the smallpox was discovered aboard. Upon William Fulkerson’s return from the steamboat trip, he warned William Clark that: “the small pox has broke out in this country and is sweeping all before it—unless it be checked in its mad career I would not be surprised if it wiped the Mandan and Rickaree [Arikara] Tribes of Indians clean from the face of the earth.”

Francis Chardon was the trader who commanded Fort Clark. His journal provides an eyewitness account of the events there as the disease took its course (Chardon, 1970). Jacob Halsey was the trader who commanded Fort Union, several hundred miles upriver from Fort Clark. Halsey was a passenger on the St. Peter’s, and contracted smallpox himself. The letter that Halsey wrote to his superiors in the fall of 1837 gives us another eyewitness account (Chardon, 1970, pp. 394-396). Charles Larpenteur was another trader at Fort Union. Larpenteur’s journal is another invaluable eyewitness record. Larpenteur’s journal was later edited and published in book form (1989).

Two of the eyewitnesses at Fort Clark offer the same hypothesis of how the disease was transmitted to the Mandan Indians. William Fulkerson, the Indian agent, and Francis Chardon, the trader, both tell a story about an Indian sneaking aboard the steamboat and stealing an infested blanket from a sick passenger. Chardon relates that he attempted to retrieve the infested blanket by offering to exchange it for a new one. This stolen blanket was the theory of infection believed by Fulkerson and Chardon who were both at Fort Clark and observed the incidents there first-hand (Audubon, 1960, pp. 42-48; Fulkerson to Clark, September 20, 1837).

Indian sub-agent Joshua Pilcher, on the other hand, offered a different theory of infection. Pilcher informed his superior that three Arikara
women aboard the steamboat also came down with the disease, and then left the boat at Fort Clark to rejoin their tribe. All modern researchers agree with Pilcher that the disease was more likely spread by human contact than by blankets. Dr. Michael Trimble’s detailed epidemiological analysis draws on the relevant primary sources to give the fullest account of the epidemic’s introduction and spread among the High Plains Indians around Fort Clark (Trimble, 1985). There was a party at the Mandan village the night the St. Peter’s arrived, attended by many of the white passengers. Thus there were plenty of opportunities for person-to-person transmission of the infection.

In short, there is no evidence at all to support the key elements of Ward Churchill’s tale. There is no evidence that U.S. Army officers or doctors were anywhere in the vicinity in June 1837. There is no evidence that any blankets were shipped from a military smallpox infirmary in St. Louis. There is no evidence that anyone passed out infested blankets to Indians with genocidal intent. Ward Churchill has invented all of this.

Defining “Research Misconduct”

Under federal law, “research misconduct” involves fabrication, falsification, or plagiarism. Fabrication means making up data. Falsification means changing or omitting data in your possession, “such that the research is not accurately represented in the research record.” Just because Churchill’s version of history is iconoclastic, that does not necessarily mean that he committed research misconduct. Federal law allows that: “Research misconduct does not include honest error or differences of opinion.”

Churchill’s transgressions take two forms. First, Churchill commits fabrication by inventing events that never happened and historical characters who never existed. Specifically, Churchill (2003b; 1997) claims that “the commander of Fort Clark had a boatload of blankets” shipped “from a military infirmary in St. Louis quarantined for smallpox,” and that “army officers” distributed these infested blankets among the Mandans as part of a genocidal plot. Churchill offers no evidence that substantiates any of this, and no such evidence exists. Churchill indicts fictional “army doctors” and “army surgeons” with ordering the Indians to disperse, thus deliberately violating quarantine practices in order to spread the disease more quickly. Again, Churchill offers no evidence that could substantiate this claim, and none exists.

Second, Churchill commits falsification by misrepresenting the sources he does cite, and by concealing disconfirming evidence in his possession. None of Churchill’s sources confirm his tale. On the contrary, all of his sources disconfirm his tale. Churchill never discloses that the authors he has cited disagree with his version of events, and never discloses that the authors he has cited offer evidence that disconfirms his own version. Churchill’s manipulation and concealment of this crucial data meets the definition of falsification under federal law. While Churchill does not appear to have received any federal funding for his research, the University of Colorado—and most other American research universities—hold all their faculty to the federal ethical standards.

Version One: 1992

Churchill published the earliest known iteration of his smallpox blanket fable in 1992, as one chapter of a book edited by M. Annette Jaimes, who was Churchill’s wife at that time. The chapter’s authorship, however, was bylined to “Lenore A. Stifff with Phil Lane, Jr.” They appear to be real people. In 2006, as part of Churchill’s defense against charges of plagiarism, he claimed to have ghostwritten this chapter (Wesson et al, 2006, p. 40, fn. 78). The University of Colorado’s investigative committee on research misconduct accepted Churchill’s ghost-
writing claim at face value. Indeed, the chapter does bear Churchill’s stylistic tics, and replicates the fabricated details that Churchill would go on to republish under his own name six more times.

However, thus evading a charge of plagiarism made Churchill vulnerable to new charges of fabrication and falsification with regards to his smallpox blanket narrative. The “Stiffarm and Lane” (1992) chapter claims that:

Certainly, the distribution of smallpox-infected blankets by the U.S. Army to Mandans at Fort Clark, on the Missouri River in present-day South Dakota, was the causative factor in the pandemic of 1836-1840. (p. 32)

“Stiffarm and Lane’s” endnote reads:

The blankets were taken from a U.S. Army infirmary in St. Louis and sent upriver on the steamer St. Peter’s. They were distributed by army personnel on June 19, 1837. See Char- don, Francis A., *Journal at Fort Clark, 1834-39*, State Historical Society of South Dakota, Pierre, 1932. (p. 50, fn. 55)

Safely concealed behind a bogus byline, Churchill launches an ad hominem attack on Russell Thornton, the author whose mortality estimates Churchill relies on for his smallpox blanket fable. In the guise of “Stiffarm and Lane,” Churchill labels Thornton as “a somewhat confused Cherokee demographer ... who appears to have glimpsed an opportunity to acquire ‘academic credibility’ through adding the weight of his ‘native voice’ to the chorus of ‘respectable scholars’[.]” (p. 27).

Version Two: 1994

In 1994, Churchill published his initial accusations of Mandan genocide under his own name, in his book *Indians Are Us?* Churchill narrates several examples of genocide against Indians, including this one:

At Fort Clark on the upper Missouri River, for instance, the U.S. Army distributed smallpox-laden blankets as gifts among the Mandan. The blankets had been gathered from a military infirmary in St. Louis where troops infected with the disease were quarantined. Although the medical practice of the day required the precise opposite procedure, army doctors ordered the Mandans to disperse once they exhibited symptoms of infection. The result was a pandemic among the Plains Indian nations which claimed at least 125,000 lives, and may have reached a toll several times that number. (p. 35)

Version Three: 1995

The next year, 1995, Churchill published a third version of his smallpox blanket story in a collection of essays entitled *Since Predator Came*:

In a similar instance, occurring in 1836, the U.S. Army knowingly distributed smallpox-laden blankets among the Missouri River Mandans; the resulting pandemic claimed as many as a quarter-million native lives. (p. 28)

Here Churchill gets the year of the epidemic wrong, setting it in 1836 instead of 1837. Churchill will repeatedly make this same error in subsequent versions. While a charge as serious as genocide would seem to mandate care with details, carelessness in itself does not constitute research misconduct.

Version Four: 1997

In 1997, Churchill embellished upon his accusations against the Army in a new collection of essays, *A Little Matter of Genocide*. First, Churchill addresses the Lord Amherst affair of 1763, in which there is compelling evidence that British colonial forces distributed smallpox-infested
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...was by no means a singular incident, although it is the best documented. Only slightly more ambiguous was the U.S. Army’s dispensing of ‘trade blankets’ to Mandans and other Indians gathered at Fort Clark, on the Missouri River in present-day North Dakota, beginning on June 20, 1837. Far from being trade goods, the blankets had been taken from a military infirmary in St. Louis quarantined for smallpox, and brought upriver aboard the steamboat St. Peter’s. When the first Indians showed symptoms of the disease on July 14, the post surgeon advised those camped near the post to scatter and seek ‘sanctuary’ in the villages of healthy relatives.[137] By then, the disease was already showing up at Fort Union, adjacent to the main Mandan village some forty miles further upriver. The trader there, Jacob Halsey, who was married to an Indian woman, then attempted to administer a vaccine which had been stored by the army rather than used to inoculate the people for whom it was supposedly provided.[*]

Churchill’s asterisked footnote reads:

Evan S. Connell, Son of the Morning Star and the Little Big Horn (San Francisco: North Point Press, 1984 pp. 15-6. The matter of vaccine is important. Deniers such as Steven Katz are wont to point to a federal policy announced in 1833 ‘requiring’ the inoculation of all Indians against smallpox as ‘proof’ that the U.S. earnestly attempted to prevent the disease from spreading among the indigenous population. [here Churchill cites to Katz 1996]. Katz, and those like him, neglect to inquire whether the supposed inoculation requirement was ever acted upon. The answer is a flat no. In post after post, vaccines, when they were provided at all, languished in storerooms rather than being adminis-

tered. If we’ve learned anything at all through historical observation of governmental conduct, it should be that ostentatious policy pronouncements lacking anything resembling serious implementation are usually a cover for something else (most often an unstated policy running in the opposite direction). In any event, arguing that the 1833 policy statement proves what Katz says it does is roughly equivalent to arguing that since the Nazis maintained medical facilities at Auschwitz they must really have had the Jews’ health at heart.

Churchill continues in the main text:

There is no conclusive figure as to how many Indians died … but estimates run as high as 100,000.

Presumably by Churchill’s reference to the “1833 policy statement” he meant to allude to the Vaccination Act passed by Congress in 1832, not 1833. Another example of Churchill’s carelessness with the facts is his claim that Fort Union was “adjacent to the main Mandan village some forty miles further upriver.” The Mandan village was adjacent to Fort Clark, not Fort Union. Fort Union is nearly two hundred miles upriver—a trip that took three days by steamboat—and not forty miles as Churchill claims.

We can construe these as more careless errors on Churchill’s part, rather than as research misconduct. But beyond these errors, in this version Churchill introduces several new fabricated embellishments. Most notable is Churchill’s new claim that smallpox vaccine was withheld and “stored by the army” rather than given to Indians.

Version Five: 2003a

In 2003, Churchill embellished even further on his accusations of smallpox blanket genocide in yet a fourth essay, entitled On the Justice of Roost-
ing Chickens: Reflections on the Consequences of U.S. Imperial Arrogance and Criminality. In the subsection titled “Chronology of U.S. Military Actions”, under the “1836” entry, Churchill (2003a) writes:

At Fort Clark, on the upper Missouri River, army officers distribute as “gifts” blankets taken from a smallpox infirmary among Mandan leaders assembled at a parlay requested by the military. When the Indians show early symptoms of the disease, army surgeons tell them to seek “sanctuary” in the villages of healthy relatives. A pandemic is thus unleashed which decimates the indigenous population of the Great Plains from Canada to the Gulf of Mexico. At least 100,000 Indians die as a result, making subsequent conquest of the region by the U.S. much easier. (p. 48)

In this version, Churchill again sets his story in 1836, even though the epidemic did not occur until the second half of 1837. This could once again be excused as yet another careless error. In this version, Churchill charges the military with requesting “a parlay” with “Mandan leaders,” and makes clear that he is charging the Army officers themselves with distributing the tainted gifts. This is a new embellishment, and pure fabrication.

In footnote seventy, page thirty, Churchill writes (emphases added):¹¹

Suspected instances of smallpox epidemics being deliberately unleashed among the native peoples of North America begin with Capt. John Smith’s 1614 foray into Massachusetts in behalf of the Plymouth Company. Confirmed—that is to say, documentable—cases include Lord Jeffrey Amherst’s order that infested blankets and other such items be distributed among the Ottawas in 1763, the U.S. Army’s duplication of Amherst’s maneuver at Fort Clark in 1836, and several repetitions by “private parties” in northern California during the 1850s (other examples accrue from British Columbia and the Northwest Territories in Canada during the later nineteenth century); see my “Nits Make Lice,” pp. 151-7, 169-70; Peter McNair, Alan Hoover and Kevin Neary, The Legacy: Tradition and Innovation in Northwest Coast Indian Art (Seattle: University of Washington Press, 1984) p. 24. It should be noted that even some rather staunch apologists for the status quo have lately begun to admit that “the history of the western hemisphere has a few examples of whites deliberately releasing the [smallpox] virus among Indians”: R. G. Robertson, Rotting Face: Smallpox and the American Indian (Caldwell, ID: Caxton, 2001) p. 301.

Compare Churchill’s rendition with what Robertson (2001) actually wrote:

Although the history of the western hemisphere has a few examples of whites deliberately releasing the Variola virus among Indians, there is no proof Captain Pratte plotted such a horrible deed. On the contrary, as a partner in Pratte & Chouteau, he had every reason to see the tribes of the upper Missouri remain disease-free. (p. 301)

Churchill has doctored his quoted passage from Robertson to conceal the fact that Robertson disconfirms Churchill’s genocide theory. Robertson also contradicts Churchill’s contention that the U.S. Army was involved, by making clear that Captain Pratte was a steamboat captain and fur trader whose interest lay in keeping the Indians disease-free. Churchill’s concealment of this inconvenient evidence in his cited source constitutes falsification.

In this version, Churchill presents his story as: “Confirmed—that is to say, documentable”—even though his own documentary sources directly contradict his story.
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Version Six: 2003b

The same year that Churchill published his *Roasting Chickens* version of the 1837 epidemic, he went on to publish yet a sixth iteration of his story in the journal *Socialism and Democracy* (2003b), once again elaborating and inventing new twists:

In 1836, at Fort Clark, on the upper Missouri River, the U.S. Army did the same thing as Amherst. It was considered desirable to eliminate the Mandans, who were serving as middlemen in the regional fur trade, and, by claiming a share of the profits in the process, diminishing the take of John Jacob Astor and other American businessmen. So the commander of Fort Clark had a boatload of blankets shipped upriver from a smallpox infirmary in St. Louis, with the idea of distributing them during a “friendship” parlay with the Mandans. There’s a bit of confusion as to whether they actually started passing them out, or whether some young Indian men “stole” a couple of blankets, but it really doesn’t matter, because the army was planning on distributing them anyway. Irrespective of the particulars in this regard, when the first Mandans began to display symptoms of the disease, they went straight to the post surgeon. They knew nothing about treating smallpox, but they’d heard about it and were terrified of it, and, since it was a white man’s disease, they went to the white doctor to find out what to do. What did he tell them? To scatter, to run for their lives, to seek shelter in the villages of healthy relatives as far away as possible.12

Again Churchill gets the year wrong, setting the epidemic in 1836 instead of 1837. Furthermore, Churchill’s own source makes clear that John Jacob Astor had sold his fur interests in 1834 (Robertson, 2001, p. 6). We can excuse these gaffes as more examples of Churchill’s cavalier relationship with the facts.13

Moving on to Churchill’s second paragraph:

It follows that what might have been a localized epidemic—the Mandans were pretty much doomed the moment the smallpox broke out among them, but it might have ended with them—ends up a pandemic that rages for 15 years, from the Blackfeet confederation in southern Canada all the way down into Texas, killing who knows how many people. The Smithsonian acknowledges about 100,000 fatalities. Thornton suggests it may have been as many as 400,000.

It is not clear who Churchill means by “the Smithsonian.” His footnote cites only Thornton, and does not reference any Smithsonian publication.

Churchill continues:

The “Fort Clark episode,” as it’s often called, has always been passed off by mainstream historians as just another one of those “inadvertent tragedies.” There aren’t any documents as explicit in their expression of intent as there are in the Amherst case, so they very conveniently chalk it up to “ignorance” on the part of the officers involved, including the post surgeon. And it’s of course true that they weren’t yet acquainted with microbes, but let’s consider what they did know. Lady Mary Wortley Montague had introduced the principle of vaccination to England somewhere around 1715. By about 1750, the whole English army had been inoculated against smallpox—that’s what allowed Amherst to do what he did—and, by 1780, George Washington had ordered that his Continental Army be inoculated as well.14

Churchill acknowledges here that “there aren’t any documents as explicit in their expression of intent as there are in the Amherst case.” But recall that Churchill wrote in *Roasting Chickens*—in
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a passage published the same year and quoted above—that his story about the 1837 epidemic was “confirmed—that is to say, documentable.”

Churchill continues:

So, unquestionably, the surgeon at Fort Clark was aware of the procedure. It had long since become standard. Indeed, a whole supply of vaccine, designated for inoculating Indians, was sitting in his store-room when the disease broke out. It had been there for several months, and there is no evidence that he’d ever tried to use it for its intended purpose. Both the surgeon and the post commander were also quite aware of the principle of quarantine. Quarantining people who’d come down with the pox had been standard medical practice for the better part of 50 years. All things considered, then, it seems to me you’d have to have undergone a lobotomy to actually believe that the surgeon’s telling the Mandans to “scatter” and “run for their lives” was either “accidental” or an “honest mistake.”

Churchill’s Falsification of Russell Thornton

In the first two versions of Churchill’s tale that he published under his own name, he cites only a single source in support of his claims: Russell Thornton’s book American Indian Holocaust and Survival: A Population History Since 1492. Thornton (1987) locates the origins of the epidemic in a steamboat traveling the Missouri River:

Steamboats had been traveling the upper Missouri River for years before 1837, dispatched by Saint Louis fur companies for trade with the Mandan and other Indians. At 3:00 P.M. on June 19, 1837, the American Fur Company steamboat St. Peter’s arrived at the Mandan villages after stopping at Fort Clark just downstream. Some aboard the steamer had smallpox when the boat docked. It soon was spread to the Mandan, perhaps by deck-hands who unloaded merchandise, perhaps by chiefs who went aboard a few days later, or perhaps by women and children who went aboard at the same time[.] (p. 96)

Note the discrepancies between Churchill and Thornton. Nowhere does Thornton mention the U.S. Army. Nowhere does Thornton mention “a military infirmary in St. Louis where troops infected with the disease were quarantined.” Nowhere does Thornton mention the distribution of “smallpox-laden blankets as gifts.” On the contrary—Thornton clearly hypothesizes the origins of the epidemic as being entirely accidental.

Thornton disagrees with the conclusions of genocide that Churchill attributes to him, telling the Los Angeles Times: “If Churchill has sources that say otherwise, I’d like to see them. But right now I’m his source for this, and it’s wrong.” (Kelly, 2005; Jaschik, 2005)

Churchill has attempted to defend his falsification of Thornton by claiming that he cited Thornton only in support of his demographic claims, not in support of his accusations of genocide. Churchill told the Denver Post (Herdy, 2005):

The UCLA professor did not say the U.S. Army intentionally distributed smallpox blankets to the Indians—I did. I said it was deliberate, he did not. I used a reference to his numbers measuring the toll taken by smallpox.

But Churchill gives no indication in his first two claimed versions that he is citing Thornton solely for “his numbers.” Churchill’s endnote to his 1994 version reads: “The Fort Clark incident is covered in Thornton” (p. 57, fn. 68).

Churchill’s endnote to his 1995 version is even more explicit: “The dispensing of smallpox-infected blankets at Fort Clark is covered in Russell Thornton” (p. 36, fn. 10). But Thornton never
mentions “dispensing of smallpox-infected blankets” to the Mandans on those pages or anywhere else in his published works, and Churchill gives no other citations in support of the Mandan story in either book.

Even if one were to accept Churchill’s claim that he cited Thornton for “numbers” alone, the fact remains that Churchill falsified Thornton’s mortality statistics as well. Citing Thornton, Churchill holds in Version Two that the pandemic “claimed at least 125,000 lives, and may have reached a toll several times that number” (p. 35). But adding up Thornton’s mortality estimates for the 1837 epidemic results in a total of less than 25,000 dead from a variety of tribes. Thornton mentions that other tribes also suffered casualties, but that “[s]pecific numbers are not recorded” (Thornton, 1987, p. 95).

In Churchill’s Version Three he doubles the mortality rate from his 125,000 in the first version to “as many as a quarter-million native lives,” again citing only Thornton (Churchill, 1995, p. 28).

By Churchill’s Version Four, he finally does cite Thornton specifically for his mortality estimates, but once again falsifies Thornton’s figures. In Churchill’s footnote at the bottom of page 155, Churchill claims that the Mandans were reduced by the 1837 epidemic to a population of “perhaps 50 survivors.” But Thornton actually reports the number of survivors as 138, not 50. Churchill claims that the epidemic killed “as much as three fifths of several northern California peoples.” Thornton did give this estimate, but also noted that it was “probably an exaggeration.” Churchill elides Thornton’s qualification. Churchill claims that 500 Choctaw died, whereas Thornton reported “400 to 500.” Churchill claims that “one third of the 9,000 Absarokes (Crows) died.” Thornton reports that one third of 3,000 Crows died. Churchill has tripled Thornton’s estimate (Thornton, 1987, pp. 95-96; Churchill, 1997, p. 155).

Thus in just this one brief footnote, Churchill falsifies Thornton by repeatedly altering, misrepresenting, and exaggerating Thornton’s death estimates. The fact that Churchill in each instance above increases Thornton’s actual estimate suggests that Churchill’s deviation from Thornton cannot be explained away as carelessness. As historian Ralph Luker (2005) has observed: “When every qualitative error in a book is an error in the direction of the book’s thesis, you have prima facie evidence of fraud.” Luker’s observation holds true for quantitative data as well.

In Churchill’s Version Six (2003b) he ups the ante yet again, this time claiming that: “Thornton suggests it may have been as many as 400,000.” Thornton takes issue with Churchill’s misrepresentation, telling the Rocky Mountain News: “There is no way I said the epidemic killed 400,000 Indians” and that there “probably weren’t too many more than 400,000 Indians in the entire U.S. at about that time” (Vaughan, 2005b).

Thornton’s book directly contradicts Churchill even in the limited domain of demographics. Thornton’s numbers are different from the numbers that Churchill attributes to Thornton. Churchill’s misrepresentation of Thornton’s numbers constitutes falsification. Furthermore, Churchill fails to disclose in his first two claimed versions that he is only relying on Thornton for the demographic portion of his argument. When Churchill writes that: “The dispensing of smallpox-infected blankets at Fort Clark is covered in Russell Thornton,” any literate person will assume that Churchill is citing Thornton in support of Churchill’s entire smallpox blanket story (Churchill, 1995, p. 36, fn. 10).

Furthermore, Churchill fails to disclose that Thornton’s explanation for the cause of the epidemic directly contradicts Churchill’s genocide story. Churchill’s concealment of the disconfirming data in his own source again constitutes falsification.
Russell Thornton described Churchill’s misrepresentation of his work to the Rocky Mountain News (Vaughan, 2005a):

For some reason, Churchill subsequently wrote about the same thing, and as far as I can tell, just fabricated all of these events, saying the epidemic was spread intentionally by the Army, saying that the Army kept the Mandan within their villages, and made all these wild accusations, and then said something to the effect of ‘see Thornton’ for this description of this event.

I think it’s just out-and-out fabrication. It depends on how you want to look at it, but in one sense, it’s just making up of data, and that kind of thing shouldn’t be tolerated in scholarship or science.

Churchill’s Fabrication of Army Presence

Churchill’s own cited sources make it clear that Fort Clark and Fort Union were not Army garrisons and never had been. They were remote fur trading outposts that were privately owned by Pratte, Chouteau & Company, and manned by a handful of white traders and their Indian employees (Chardon, 1970, p. xv and passim). This is made explicit in the only primary source that Churchill cites—the journal kept by the fur trader Francis Chardon, the head trader at Fort Clark. Once again, this is not a matter of differing historical interpretations. Anyone reading Chardon’s journal will come to this conclusion, and it is corroborated by all other sources, both primary and secondary. No U.S. Army units were deployed anywhere in the vicinity of Fort Clark in 1837. These fur traders were operating far beyond the frontiers of American settlement at that time, and were the only non-natives resident in the region. The nearest U.S. military base was Fort Leavenworth, more than eight hundred miles away.

Churchill, attempting to defend his fabrication of U.S. Army involvement, pointed the Rocky Mountain News to a passage in Evan Connell’s (1984) book that reads:

Five opportunistic Assiniboin, thinking to benefit from the chaos at Fort Union, nimbly scaled the palisade and stole two horses. They were chased and caught by a detachment of soldiers who persuaded them to give up the horses, so the incident ended with no trouble—except that one of the soldiers happened to be infected and the Assiniboin horse thieves innocently took the disease home. (p. 16)

Churchill argued that this passage shows U.S. Army operating in the vicinity (Rocky Mountain News, 2005):

OK, it says right there on that page, soldiers. Now I don’t know where soldiers fit in your universe, but they fit in the Army’s in mine.

Churchill’s contention here would seem to be a smokescreen to excuse his fabrications. Certainly a professor of Indian Studies would at least be familiar with the Cheyenne Dog Soldiers, and thus know that the word “soldier” is commonly used to refer to Indian warriors. Churchill’s own source—Francis Chardon’s journal—also makes that abundantly clear. For example, Chardon (1970) wrote in his journal entry for August 18, 1837 (p. 129):

An old Ree started this Morning to pay a visit to the Gros Ventres [Hidatsa], the Soldiers would not let him enter the Village, they have made a quarantine and they will permit no one from this place to come near them.

An uninformed reader seeing this quote out of context might mistakenly assume that Chardon was referring to U.S. Army soldiers. But an expert on Indian culture and history—such as Churchill, presumably—would know that the
“soldiers” that Chardon refers to here are members of the Hidatsa soldier society, and not U.S. Army. Chardon would have recorded any U.S. Army action in the region in his journal, because that would have been a remarkable occurrence so far beyond the frontier.

The next day, Chardon (1970) wrote:

Sent ten Pounds of tobacco to the Soldiers of the Gros Ventres, begging them to Not come to their summer Village, as the disease has not yet broke out amongst them[]. (p. 129)

Here Chardon makes it obvious even to the non-specialist that when he uses the word “soldiers,” he is referring to the Hidatsa soldier society, not U.S. Army. On August 22, Chardon wrote:

One of my Soldiers—(Ree) died to day” (p. 131)

“Ree” is how the traders referred to the Arikara people. This entry indicates that the traders considered their Indian security guards to be “soldiers.”

Thus anyone who has read the source that Churchill cites would be well aware that in Plains history, the word “soldiers” does not always signify U.S. Army. Furthermore, those familiar with this history know that the horse theft anecdote traces back to the journal kept by Charles Larpenteur, one of the traders at Fort Union, who was an eyewitness to the 1837 epidemic. Larpenteur’s journal entry makes clear that the men pursuing the Assiniboine horse thieves were not U.S. military, but rather fur company employees and friendly Indians living at the post:

[S]everal of our activest men mounted the Emerican horses fast runners which were kept in the stables of the new Fort soon over took them and by the assistance of some good Indians brought them back[].18

We have already seen above that traders routinely used the word “soldiers” to describe fighting men other than U.S. military. Had Churchill read his own source—Chardon—he would be well aware of how the word was used.

By relying on his misreading of the passage by Evan Connell, Churchill is essentially pleading guilty to incompetence in order to evade a charge of fabrication. Even if you excuse Churchill for misreading Connell as somehow indicating the presence of U.S. Army soldiers, Connell still in no way supports Churchill’s smallpox blanket genocide story. On the contrary, Connell presents the infection as entirely incidental to an attempt to retrieve stolen horses. Furthermore, Churchill places the U.S. Army at Fort Clark, and not at Fort Union where Connell’s incident takes place. Regardless of any misreading of Connell, Churchill still remains guilty of fabricating the presence of Army personnel distributing smallpox blankets at Fort Clark.

Churchill’s Fabrication of Army Medical Personnel Involvement

A core element of Churchill’s tale is his insistence that U.S. Army medical personnel took part in his smallpox blanket genocide by telling infected Indians to “scatter” and spread the infection more widely. Churchill alternately attributes his deliberate, genocidal violation of quarantine to “army doctors,” “army surgeons,” “the post surgeon,” and “the white doctor.”

But Fort Clark was not a U.S. military base, and no Army troops were operating in the vicinity this far beyond the frontier. Nor did Fort Clark have a surgeon or a doctor. Historian Clyde Dollar (1977) reports that: “the only medical advice within a thousand miles [was] the fort’s copy of ‘Dr. Thomas’ Medical Book.’” (p. 22)19
Churchill has attempted to defend his fabricated tale of U.S. Army doctors at Fort Clark, in a long letter that Churchill sent to Lamar University administrators, as part of a complaint against this author. In this letter, Churchill fabricates the existence of a “post surgeon” at Fort Union in order to justify his fabrication of “Army doctors at Fort Clark.” Churchill (2005b) transforms Charles Larpenteur—who was a clerk at the fur company’s Fort Union trading post—into a “post surgeon”:

The “post surgeon,” whose name was Charles Larpenteur, was actually at Fort Union rather than Fort Clark—the near-simultaneous outbreaks of smallpox at the two are typically treated as a single phenomenon—and normally functioned as a clerk; Robertson, Rotting Face, pp. 230-1. (p. 8, fn. 24)

Churchill’s citation to Robertson is spurious. There is no mention of Charles Larpenteur on those pages in Robertson. Churchill appears to have picked random pages to cite, to give the impression that he can substantiate his claim. Robertson does mention Larpenteur in other parts of the book, but never refers to Larpenteur or any other individual as “post surgeon.” That’s a new falsification on Churchill’s part. The fact that Churchill is engaging in new mendacity in order to cover his earlier fabrications provides more evidence that his tale arises out of a deliberate attempt to deceive, and not an honest error.

In Churchill’s published versions, he indicts the “post surgeon” for inciting the Mandans to scatter at Fort Clark. Now, Churchill is changing his story to say that the post surgeon was at Fort Union. In doing so, Churchill tacitly concedes that in his published versions he fabricated the existence of a post surgeon at Fort Clark. Given that the Mandans lived at Fort Clark, not Fort Union, Churchill is also tacitly conceding that he fabricated his story of the fictional surgeon telling the Mandans to “scatter.”

Recall also that in Churchill’s Version Four (1997), he wrote:

Jacob Halsey, who was married to an Indian woman, then attempted to administer a vaccine which had been stored by the army rather than used to inoculate the people for whom it was supposedly provided. (pp. 155-156)

Now Churchill (2005b) is changing his story again, to argue that it was Larpenteur who administered vaccine, and not Jacob Halsey as he first claimed. Larpenteur was a clerk working under Halsey in the fur trading enterprise at Fort Union. Larpenteur’s (1989) published memoirs recall that “we”—the traders—collectively decided to attempt to fashion a vaccine out of matter extracted from Halsey, who was sick in bed with the smallpox (pp. 109-110). This rudimentary vaccine was given to white traders at Fort Union as well as Indians. Larpenteur’s memoir gives no indication that he functioned as a “post surgeon.” Larpenteur makes clear that the traders were appalled by the epidemic, and were attempting to improvise a vaccine in order to halt the epidemic. This in no way substantiates Churchill’s story of deliberate genocide perpetrated by the U.S. Army. On the contrary, it totally disconfirms Churchill’s story.

Churchill is inventing a new story, about an amateur post surgeon at Fort Union, in order to substantiate his earlier fabrication that “Army doctors” and “Army surgeons” were involved in genocide several hundred miles away at Fort Clark. By doing so, Churchill tacitly admits that his published version of events at Fort Clark was a fabrication.

Churchill (2005b) continues:

Larpenteur may well have received rudimentary training in administering vaccinations from an actual Army surgeon, known only as Dr. Martin, who visited Fort Union in 1833 to
Did the U.S. Army Distribute Smallpox Blankets to Indians?—Brown

... deliver an undetermined quantity of cowpox vaccine [p. 225].

Churchill’s cited source—R. G. Robertson—does not verify any of these claims, which constitute more new deceits on Churchill’s part. Larpenteur did not even arrive at Fort Union until 1834 (Larpenteur, 1834-37). Larpenteur’s own eyewitness account of the 1837 epidemic describes the traders’ futile attempt to create a vaccine as being guided by a medical textbook they had on hand, and not by any preexisting expertise on Larpenteur’s part. Churchill’s own cited source—the Stearns’ book—also reports the same (Stearn & Stearn, 1945, p. 82).

In Churchill’s Version Two, he asserts that there were “army doctors” at Fort Clark in 1837 participating in genocide. In Churchill’s Version Five, he indicts “army surgeons” at Fort Clark. Now, backpedaling, Churchill points to Larpenteur, a clerk at Fort Union—not Fort Clark—who, Churchill mistakenly speculates, could have received medical training at Fort Union in 1833—even though he didn’t arrive there until 1834—from a doctor engaged by the Indian Bureau, who could have been in the Army. A charge as serious as genocide demands evidence—not unsubstantiated speculation about the universe of plausibilities.

Churchill (2005b) argues that:

In any event, non-medical personnel doubling as “surgeons” was not an unusual situation in frontier posts during the period; for confirmation, for corroboration, see Enid Thompson, “Life in an Adobe Castle, 1833-1849,” Colorado Magazine, Vol. LIV, No. 4, 1977, p. 22. (p. 8, fn. 24)

Larpenteur’s eyewitness journal make it clear that there were no doctors or surgeons in the vicinity in 1837, and that the traders were attempting to fashion a vaccine by consulting a medical text authored by Dr. Thomas. The existence of such amateur doctoring on the frontier is not in dispute, but it hardly substantiates Churchill’s published assertions that “Army doctors” or “Army surgeons” were involved in a genocidal conspiracy to create a smallpox epidemic from infested blankets.

Churchill’s defense here seems to be that when he published his indictment of “Army doctors” and “Army surgeons” at Fort Clark for participating in a smallpox blanket genocide against the Mandan Indians, he really meant to refer to the fur traders at Fort Union, several hundred miles away, who were desperately attempting to create their own vaccine out of a scab in order to halt the smallpox epidemic. This is no defense at all, and amounts to a tacit admission that he fabricated his published story.

Churchill’s Fabrication of Quarantine Violations

In Churchill’s published Versions Two, Four, Five, and Six, he indicts Army doctors for encouraging the infected Indians to violate quarantine, as part of the Army’s genocidal conspiracy to spread smallpox among the Indians. For example, Churchill’s (1994) Version Two:

Although the medical practice of the day required the precise opposite procedure, army doctors ordered the Mandans to disperse once they exhibited symptoms of infection. (p. 35)

We’ve seen above that Churchill has fabricated the existence of Army medical personnel on the scene, and Churchill certainly has no evidence that his fictional Army doctors violated quarantine. As part of this fabrication, Churchill has concealed evidence in his own sources that shows the people on the scene attempting to keep quarantine as best they could. Churchill’s failure to report this disconfirming evidence in his possession constitutes falsification.
Churchill’s assertion across his various versions that, alternatively, “Army doctors,” “army surgeons,” or the fictional post surgeon ordered Indians to disperse in order to spread the disease is a fabrication. An eyewitness on the scene at Fort Union—the trader Jacob Halsey—complained in a letter that (Chardon, 1970):

... during the prevalence of the malady the Assiniboines were continually coming in. I sent our Interpreter to meet them on every occasion, who represented our situation to them and requested them to return immediately from whence they came ... I could not prevent them from camping round the Fort—they have caught the disease, notwithstanding I have never allowed an Indian to enter the Fort, or any communication between them & the Sick ; but I presume the air was infected with it ... My only hope is that the cold weather will put a stop to the disease ... Pray send some Vaccine matter[.] (pp. 394-396)

This letter is printed as an appendix to Chardon’s journal, the only primary source that Churchill cites in support of his story. Halsey is clearly describing a futile attempt to quarantine the sick people inside the post, and to prevent the healthy Indians from coming into contact with the ill.

At Fort Clark, Chardon wrote in his journal entry for August 7 that “several Rees left the Mandan Village, and Pitched their Lodges Out in the Prairie” (1970, p. 126). This is one of several data points showing that some Indians took action to quarantine themselves. There being no “post surgeon” or “army doctors” present to tell them to go, we must attribute agency to the Indians. Dr. Michael Trimble’s (1985) epidemiological analysis of the 1837 outbreak observes that “[b]y removing their lodges from the village these families were quarantining themselves” and that they “greatly reduced their chances of acquiring and spreading smallpox from the Fort Clark village. Conversely, if some members of the quarantined Arikara group already were infected, their movement assured that smallpox would not be transmitted to anyone beyond their group” (p. 224).

Chardon noted on August 10 that: “All the Ree’s ... except a few that are sick, Moved down to the Island hoping to get rid of the small pox”. The next day, “Mandans all crossed to the other side of the river to encamp—leaveing all that were sick in the Village” (p. 126). Here again we see Indians dispersing, not under orders from a fictional character, but of their own volition, in a futile attempt to quarantine themselves. The healthy Indians were so desperate to achieve this goal that they left all sick people behind without anyone to care for them (Trimble, 1985, pp. 226-228).

Chardon (1970) wrote on August 18 that:

An old Ree started this Morning to pay a visit to the Gros Ventres [Hidatsa], the Soldiers would not let him enter the Village, they have made a quarantine and they will permit no one from this place to come near them. (p. 129)

The next day, Chardon wrote that he’d:

Sent ten Pounds of tobacco to the Soldiers of the Gros Ventres, begging them to Not come to their summer Village, as the disease has not yet broke out amongst them ... I was in hopes that the disease was almost at an end[.] (pp. 129-130)

These entries show that all responsible parties on the scene—both Indian “soldiers” and the commander of Fort Clark—were attempting to enforce and maintain quarantine (Trimble, 1985, pp. 234, 239-240).

In Version Six, Churchill (2003b) claims that:
Both the surgeon and the post commander were also quite aware of the principle of quarantine. Quarantining people who’d come down with the pox had been standard medical practice for the better part of 50 years. All things considered, then, it seems to me you’d have to have undergone a lobotomy to actually believe that the surgeon’s telling the Mandans to “scatter” and “run for their lives” was either “accidental” or an “honest mistake.”

In this version, Churchill places his fictional surgeon’s orders within quotation marks, in an attempt to validate his story by fabricating quotes from a person who never existed.

As we have seen above, Churchill’s assertion that the fictional post surgeon advised infected Indians near the post to “scatter, to run for their lives, to seek shelter in the villages of healthy relatives as far away as possible” is a repeated trope in his fabrication. Churchill’s concealment of the various quarantine attempts made by the traders and Indians—and described in three of the sources he cites—constitutes falsification.

**Churchill’s Fabrication of Stored Vaccine**

A key element of Churchill’s tale is his contention that vaccine was available on the scene of the 1837 epidemic, but was withheld in storage by “the army” instead of being administered. This is another fabrication on Churchill’s part.

**Churchill’s Version Four (1997):**

Katz, and those like him, neglect to inquire whether the supposed inoculation requirement was ever acted upon. The answer is a flat no. In post after post, vaccines, when they were provided at all, languished in storerooms rather than being administered. (pp. 155-156)

Churchill then goes on to claim that the Fort Union fur trader Jacob Halsey “attempted to administer a vaccine which had been stored by the army rather than used to inoculate the people for whom it was supposedly provided” (Churchill, 1997, p. 155).

Churchill’s Version Six (2003b):

So, unquestionably, the surgeon at Fort Clark was aware of the procedure. It had long since become standard. Indeed, a whole supply of vaccine, designated for inoculating Indians, was sitting in his storeroom when the disease broke out. It had been there for several months, and there is no evidence that he’d ever tried to use it for its intended purpose.

Churchill has fabricated the existence of stored vaccine in both Versions Four and Six. In Version Six, Churchill also falsifies Evan Connell by citing Connell’s book in support of this claim. But Connell never mentions stored vaccine at all. Connell told the press: “It sounds as though Mr. Churchill’s stuff should be examined rather carefully ... He attributed to me some knowledge of an unused vaccine ... I don’t think I mentioned it anywhere in the book ... I think he invented that” (Vaughan, 2005a).

In 1832, the U.S. Congress passed an act that appropriated $12,000 for vaccinating Indians in response to epidemic smallpox on the Central Plains (Pearson, 2003, pp. 9-10). The vaccination program was implemented by the Office of Indian Affairs. Secretary Lewis Cass set the outer boundary for the vaccination program at Fort Clark. According to Cass (Chardon, 1970):

no effort would be made ... under any circumstances ... to send a Surgeon higher up the Missouri than the Mandans, and I think not higher than the Aricaras. (p. 319, fn. 507)
Indians living north of Fort Clark were not included in the initial phase of the vaccination program. It is unclear as to how the program’s outer boundary was drawn, and why the vaccination program ended at Fort Clark. Historians disagree on the reasons. Diane Pearson (2003) argues that the boundary was set at Fort Clark because Secretary Cass considered the Indians of the Upper Missouri to be “aggressor nations” (p. 20). But Pearson’s evidence for her contention is a peace treaty signed with the Mandans in 1825. Using a peace treaty as evidence of hostile relations between the signatories to that treaty twelve years later makes for a weak argument. Furthermore, Cass’s order does not specifically exclude the Mandans from vaccination.\textsuperscript{25}

Pearson’s dubious hypothesis for Cass’s boundary is challenging other historians’ speculation as to why the 1832 vaccination program did not extend to the Indians at Fort Clark and points north. More plausible arguments in the existing literature have pointed to economic limitations and logistical challenges as explanations for how the program’s boundaries were drawn. The vaccination program’s initial appropriation was not sufficient to inoculate all of the Indian population across the entire continent. Hence the program initially focused on those Indians living within or near the frontier. Fort Clark was a thousand miles away from the frontier settlement at St. Louis. There was only one steamboat trip each year to the upper Missouri tribes, which took months to complete. Thus there were significant challenges in transporting the fragile vaccine that distance while maintaining its potency. Other historians have speculated that recent murders of whites by Indians may have made government bureaucrats leery of sending men that far into the frontier, or that Secretary Cass did not want to give aid to the pro-British Blackfeet (Ferch, 1983, p. 4; Robertson, 2001, p. 225).

The fact is that we do not have conclusive evidence as to how Secretary Cass decided to draw the geographical boundaries for the vaccination program. Is it reasonable to say that Cass’s boundaries on the vaccination program mean that the U.S. “withheld” vaccine from the High Plains Indians? That would be an unusual location, but within the realm of acceptability. But Churchill goes beyond that point, to claim that “in post after post, vaccines, when they were provided at all, languished in storerooms rather than being administered,” and that at Fort Clark in particular “a whole supply of vaccine, designated for inoculating Indians, was sitting in his store-room when the disease broke out” (Churchill, 1997; 2003b).

Needless to say, Churchill’s published versions offer no evidence to support his claim that vaccine was stored at Fort Clark rather than administered. If the vaccination program didn’t extend to that region to begin with, then Churchill would need to explain why the government would have shipped “a whole supply of vaccine” there in order to store it “in post after post,” and needs to cite evidence that this absurdly illogical action was ever taken.\textsuperscript{26}

Churchill also fails to disclose that the U.S. government’s response to the 1837 epidemic was to appropriate an additional $5,000 to supplement and extend the vaccination program (Pearson, 2003, p. 10). Churchill fails to mention that Joshua Pilcher—the Indian agent who advocated and implemented the extended vaccination program in response to the 1837 epidemic—was promoted to Superintendent in 1838 (Sunder, 1968). William Fulkerson, the Mandan sub-agent who Churchill indicts as genocidal, was forced to resign in the wake of the epidemic. All of this evidence argues against Churchill’s genocide conspiracy tale.\textsuperscript{27}
Churchill’s source for Version Four—the Stearns’ book—gives an entire chapter on the federal government’s various vaccination programs, and the Stearns do discuss the 1832 Vaccination Act (Stearn & Stearn, 1945, pp. 63-64). Churchill’s (1997) failure to disclose that his cited source disconfirms his assertion that “the supposed inoculation requirement” was never acted on constitutes another falsification. Churchill also fails to disclose the Stearns’s book description of how the U.S. government responded to the 1837 epidemic by expanding the vaccination program to the Indians even farther beyond the frontier. The Stearns also explicitly state that “the traders ... had no vaccine,” which also disconfirms Churchill’s claim of stored vaccine (Stearn & Stearn, 1945, p. 82). Churchill conceals this as well.

Citing Larpenteur’s journal at Fort Union, the Stearns relate that “the traders, because they had no vaccine, decided to inoculate or variolate, using smallpox virus from Mr. Halsey” (p. 82). Thus Churchill’s own source—the Stearns—directly contradicts Churchill’s claim that the post held vaccine that had been “stored by the army” and that the trader Halsey broke it out of storage and administered it. In fact, Halsey himself was sick with smallpox. Larpenteur’s eyewitness account tells us that the traders attempted to fashion their own vaccine from matter taken from Halsey’s wounds. Why would they need to improvise a vaccine if they already had a supply of vaccine in their storeroom? And why would Halsey beg his superiors to “[p]ray send some Vaccine matter” if he already had a supply on hand (Stearn & Stearn, 1945, p. 82; Dollar, 1977, p. 22; Larpenteur, 1989, pp. 109-110; Chardon, 1970, p. 396)?

Historians have advanced a number of reasons to explain why the upper Missouri tribes were not included in the initial phase of vaccination, but no historian has ever accused the War Department of bio-warfare genocide in carrying out the 1832 vaccination program. The fact that a vaccination program with limited funding extended only to the outermost federal sub-agency beyond the frontier, and no further, is not in itself evidence of a genocidal act against tribes living beyond the border of the vaccination program. There is no apparent motive or opportunity for anyone to have withheld and stored vaccine. As the Indian agent Joshua Pilcher—an eyewitness to the 1837 epidemic—observed of the fur traders at that time:

Apart from any motive of humanity, both their interest and safety would induce them to introduce it wherever practicable.[28]

Journals and letters written by the fur traders who did man Fort Clark make it clear that they were appalled by the epidemic, in part because they had Indian wives and children and were thus a part of the Indian community. The traders also had economic interests in keeping the Indians healthy. At Fort Union, the trader Jacob Halsey—who himself contracted the smallpox—lamented that “[t]he loss to the company by the introduction of this malady will be immense in fact incalculable as our most profitable Indians have died.” (Chardon 1970, p. 395) At Fort Clark, Francis Chardon wrote: “The Whole Country North and South is one Solid Mass of Buffalo, And Sorry to Say, No Indians to Kill them” (Trimble, 1985, p. 260). The traders would not seem to have any incentive to wage biological warfare on their own families and their “most profitable Indians,” much less put their own lives at risk. Indeed, in response to the epidemic, the fur company embarked on its own program of vaccination, independently of the federal program (Trimble, 1985, pp. 276-277).

Churchill is perfectly entitled to believe in a fantastic conspiracy theory, in which the U.S. government sets up a vaccination program for Indian tribes as part of a secret plot to commit biowarfare genocide against Indians. Churchill’s belief in an absurd and unsubstantiated conspiracy theory is not in itself research misconduct.
But Churchill’s claim that the army allowed vaccine to “languish in storerooms” in “post after post” is a total fabrication. There are no primary sources that place stored vaccine at any of the Upper Missouri trading posts in 1837, and no historian has ever claimed that the U.S. Army stored or withheld vaccine at Fort Clark or anywhere else on the High Plains in 1837.

Churchill’s Fabrication of Smallpox Blanket Distribution

At the core of Churchill’s tale is his contention that the U.S. Army was involved in distributing infested blankets taken from a military smallpox infirmary in St. Louis.

In Version Two, Churchill (1994) writes:

At Fort Clark on the upper Missouri River, for instance, the U.S. Army distributed smallpox-laden blankets as gifts among the Mandans. The blankets had been gathered from a military infirmary in St. Louis where troops infected with the disease were quarantined. (p. 35)

In Version Six, Churchill (2003b) writes:

So the commander of Fort Clark had a boatload of blankets shipped upriver from a smallpox infirmary in St. Louis, with the idea of distributing them during a “friendship” parlay with the Mandans.

We’ve already seen that the “commander of Fort Clark” was not U.S. Army, but Francis Chardon, a civilian fur trader. Churchill has cited Chardon’s journal, and so he is well aware of this. Did Chardon have “a boatload of blankets” shipped from a military smallpox infirmary? Churchill offers no evidence at all for this contention. Certainly the steamboat brought trade goods for Chardon to exchange for furs, and they could have included blankets. But there is no evidence at all of any goods originating from a military smallpox infirmary as Churchill claims. Furthermore, there is no apparent motive for Chardon to want a shipment of infested blankets from a military infirmary. That would have gone against his own economic interests, not to mention his personal safety and that of his family and co-workers. Indeed, Chardon’s own two-year-old son was a passenger on the St. Peter’s along with the trade goods, and the child died during the epidemic.\textsuperscript{29}

The only federal employee in the vicinity of Fort Clark at the time of the infection was William Fulkerson, the Mandan sub-agent. His was a patronage position with the Indian bureau, and in no way can he be construed as U.S. Army. Nor did Fulkerson dispense any trade blankets to the Mandans. Chardon’s journal—Churchill’s own source—clearly states that when Fulkerson met with the Mandans he had “nothing to give his red children” (Chardon, 1970, p. 118). The Indian Bureau had not allocated funds to Fulkerson for any presents in his agency that year.

Churchill (2005b) attempts to defend his fabrication by claiming that Fulkerson passed out gifts to the Mandans on the steamboat’s hour-long stop at Fort Clark on its return trip back down the Missouri River (p. 8, fn. 23). This second visit is briefly mentioned by the trader Chardon in his journal (Chardon, 1970, pp. 118-119). However, it is unlikely that Fulkerson distributed any gifts at all. Fulkerson wrote several reports to his boss in 1837, complaining both times that the appropriation for annuity gifts had been discontinued for that year. This is borne out by the relevant accounting records as well.\textsuperscript{30} In Fulkerson’s annual report to William Clark in October 1837, he complains of:

\begin{quote}
… the entire failure to receive any presents for the tribes within my sub-agency during the present year. All the Indians were exceedingly disappointed at my not receiving presents by the Steam Boat which arrived this
\end{quote}
last spring. They had been anxiously awaiting its arrival, and were dissatisfied beyond measure when they were informed that none had arrived. The Arrickarees, expressed more dissatisfaction than any other tribe, they had been informed that they should receive presents when the Boat should arrive, and could not repress their indignation when disappointed.31

Fulkerson goes on to describe the danger he faced from the angry Indians. He attempted to mollify them by promising that the missing presents were an accidental oversight, and that presents would arrive on the next steamboat. Fulkerson spends several pages emphasizing to Clark the political importance of continued gift-giving in order to maintain friendly political relationships with the Indians in his agency, and complaining that the presents had been not been funded for 1837.

But for the sake of argument, let’s stipulate that Chardon is correct, and that Fulkerson did distribute a few token gifts on the return voyage downstream. Churchill fails to disclose that Chardon describes Fulkerson passing out a few gifts to the Arikaras at Fort Clark on the return voyage downstream—and not to the Mandans during the steamboat’s first stop on its upriver voyage, as Churchill falsely claimed in his published versions. Had the gifts been the vector, the disease would have appeared among the Arikaras prior to the Mandans, which is the opposite of what actually happened. Dr. Michael Trimble’s detailed epidemiological analysis of the 1837 outbreak conclusively demonstrates this progression of the disease (Trimble, 1985).

Churchill’s description of “the U.S. Army’s dispensing of ‘trade blankets’ to Mandans and other Indians gathered at Fort Clark” is a fabrication, as is Churchill’s assertion that “the blankets had been taken from a military infirmary in St. Louis quarantined for smallpox.” Churchill has cited no evidence of U.S. Army involvement, no evidence of a shipment of blankets from a military smallpox infirmary, and no evidence of any infested blankets being distributed by anyone at Fort Clark whatsoever.

Churchill has recently backed away from his story of a military smallpox infirmary in St. Louis. Now, attempting defend himself against charges of fabrication, Churchill claims that “the infirmary was situated aboard the St. Peter’s itself” (Wesson et al, 2006, p. 69). Thus Churchill tacitly concedes that he fabricated his claims of blankets shipped from a military infirmary in St. Louis. And since the St. Peter’s was owned and operated by the fur trading firm—not the U.S. Army—Churchill also tacitly concedes that he fabricated his smallpox blankets allegations against the Army.

**Churchill’s Concealment of the “Stolen Blanket” Trope**

Two of Churchill’s sources—Stearn & Stearn (1945, p. 81) and Connell (1984, pp. 15-16)—relate a story originally told by two eyewitnesses at Fort Clark: William Fulkerson, the Mandan sub-agent, and Francis Chardon, the head trader (Audubon, 1960; Fulkerson to Clark, September 20, 1837). The story, according to Chardon and Fulkerson, is that an Indian stole an infested blanket from the steamboat, which spread the disease to the Indians. Dr. Michael Trimble’s (1985) epidemiological analysis indicates that human contact was the most likely vector for the disease’s transmission. Nonetheless, infection via the “stolen blanket” is the theory that Fulkerson and Chardon believed at the time.

In the rendition of the story given by Churchill’s own source—the Stearns—the trader Chardon tried to retrieve the infested blanket from the Indian thief by promising to exchange it for clean blankets. Substantially the same “stolen blanket” story is related by Evan Connell, Churchill’s third source for his Version Four.
The stolen blanket story directly contradicts Churchill’s claim that the army distributed infested blankets obtained from a military infirmary as gifts to the Mandans, and so Churchill concealed it in his first four published versions, thus committing falsification.

Only in Version Six does Churchill (2003b) finally acknowledge the existence of the stolen blanket story:

So the commander of Fort Clark had a boatload of blankets shipped upriver from a smallpox infirmary in St. Louis, with the idea of distributing them during a “friendship” parlay with the Mandans. There’s a bit of confusion as to whether they actually started passing them out, or whether some young Indian men “stole” a couple of blankets, but it really doesn’t matter, because the army was planning on distributing them anyway. Irrespective of the particulars in this regard, when the first Mandans began to display symptoms of the disease, they went straight to the post surgeon.

Here for the first time Churchill acknowledges the stolen blanket trope, having concealed it in his previous versions. Churchill realizes that the stolen blanket trope disconfirms his story of intentional genocide, and so attempts to explain it away by claiming that “it really doesn’t matter, because the army was planning on distributing them anyway.” Here, Churchill has backed off of the allegation he made in his first four versions—that the Army actually had distributed blankets. He seems to be acknowledging that the Army may not have distributed blankets, but argues that the Army intended to distribute.

Recall that in Versions One through Five, Churchill indicted the Army for passing out blankets. Now he backpedals, saying that: “There’s a bit of confusion as to whether they actually started passing them out, or whether some young Indian men ‘stole’ a couple of blankets.” Churchill seems to have realized that he cannot prove his earlier contentions that the Army distributed blankets. In reality, the Army had no involvement in Chardon’s business at Fort Clark, no Army personnel were in the region, and Churchill certainly has no evidence that the Army was in any way involved in shipping contaminated blankets to gift during a “parlay” with the Mandans.

In Churchill’s (2005b) attempt to defend his fabrications, he writes:

... At p. 299, Robertson also debunks the story put forth both by Fulkerson and by the commandant of Fort Clark, Francis Chardon, that no blankets were distributed (and that the outbreak was caused by an Indian stealing a blanket). Although Dr[.] Brown places considerable credence in the fable at p. 4 of his updated “paper,” it was disbelieved by officials at the time. (p. 8, fn. 23)

Churchill’s mendacity takes on a remarkable recursive quality here. First, Churchill engages in new fabrication to defend his previous fabrication. Neither Fulkerson or Chardon ever “put forth” a story that “no blankets were distributed,” because no one had ever made that charge against them prior to Churchill. This is a new fabrication on Churchill’s part. Next, Churchill questions the validity of the “no blankets were distributed” story that he himself has just invented. Of course Churchill’s “no blankets” story could not have been believed by officials at that time, because Churchill hadn’t invented it yet.32

The fact that two independent eyewitnesses at Fort Clark both told essentially the same story about a stolen blanket lends credence to its validity, although the issue is certainly open to interrogation. But in Churchill’s first five published versions, he did not question the story, but simply concealed it, because it tends to disconfirm his tale of intentional genocide.
Now, on the defensive in his letter to Lamar, Churchill wants to have it both ways. On one hand he presents the stolen blanket story as somehow confirming his notion that infested blankets were given as gifts, or that there was a genocidal plan to do so. But Churchill also misrepresents the story as a denial of blanket distribution, and then says you can’t believe his own doctored version of the story. Churchill engages in such shenanigans because he doesn’t want you to believe the actual story of stolen blankets, because it disconfirms his tale of intentional genocide in which Army officers distributed—or planned to distribute—a boatload of infested blankets. Churchill’s pretzel logic ties him up in knots here. If the stolen blanket story is spurious, then Churchill cannot use it to substantiate his contention that infested blankets were given out. If the stolen blanket story is valid, then it disconfirms his tale of deliberate genocide. And if Churchill acknowledges that the Army never did distribute blankets, but only planned to do so, then he is tacitly acknowledging that he fabricated the tale he told in Versions One through Five.

Oral History

Is it possible that Churchill has additional sources which he did not cite that might still validate his charge against the US Army? Could it be that Churchill is guilty of no more than sloppy citations? In all fairness to Churchill, the smallpox blanket hypothesis of Plains epidemics dates back to the 19th century. In the aftermath of the disastrous epidemic, some people made accusations of deliberate infection. For example, in 1884, Hubert Howe Bancroft (1884) wrote of a smallpox outbreak that he dates to 1836, commenting in a footnote that:

Beckwourth, the negro, was accused, I do not know how justly, of willfully sowing smallpox among the pestiferous Blackfeet, by disposing to them of certain infected articles brought from St. Louis. (p. 602, fn. 3)

This story suggests that one element of Churchill’s version is not original to him—the deliberate infection, originating from St. Louis. But problems remain. Bancroft cites no sources, restricts this observation to a footnote, and does not seem confident in the rumor’s reliability. Testing the rumor against what is known, we find immediate contradictions. First, the Mandan epidemic broke out in June 1837, not 1836, and Mandan territory was distant from Blackfeet territory. Contemporary versions of the Beckwourth rumor have him visiting the Crow—not the Blackfeet—in the spring of 1837. Second, Beckwourth had been employed by the American Fur Company, and was trying to renew his contract with the company when he visited the Crow in 1837. He had operated a trading post among the Blackfeet, and married two Blackfeet women. Furthermore, Beckwourth had lived among the Crow for six to eight years, and had additional wives and relatives among that tribe as well. Beckwourth would have no more motive to deliberately infect his family members—and the potential trading partners of the company with which he was seeking a contract—than would the traders at Fort Clark (Bonner, 1972; Wilson, 1972; Beckwourth & Bonner, 1856). The trader Jacob Halsey wrote on November 2, 1837, that the smallpox epidemic had been introduced among the Blackfeet by a sojourning member of their own tribe, who had returned home on the steamboat St. Peter's (Chardon, 1970, pp. 394-395). Thus Bancroft’s version of events is directly contradicted by the Halsey letter, which is contained in a book cited by Churchill.

The problem remains: Where did Churchill get the idea of smallpox blankets originating in an Army infirmary? Where did Churchill get the idea that there were Army doctors at Fort Clark who told the Mandans to scatter and spread the disease? Where did Churchill get the idea that the Army stored and withheld vaccine that Con-
gress intended for the Indians? None of these elements of Churchill’s tale can be found in earlier traditions.

Is it possible that Churchill could fashion a defense of his fabrications by citing Indian “oral history,” even though he has never cited it before in any of his five previously published versions? Of course there is no one alive today who witnessed events in 1837. Numerous eyewitness accounts of the epidemic have survived in written form, but only one from an Indian: the Mandan chief Four Bears.

The Four Bears speech was interpolated into the published version of Francis Chardon’s journal in 1932 by Helen Abel, the book’s editor. This was a dubious editorial decision on Abel’s part. Chardon’s original manuscript does not contain this speech in that journal entry. Instead, the speech is transcribed on a loose piece of paper that was found with the bound journal. The speech’s date, provenance and transcriber are all unknown. Chardon himself communicated with the Mandans through a translator, and lacked the command of the Mandan language necessary to transcribe the speech with such eloquence himself. Some historians doubt that Chardon was even present when the speech was made, given Four Bears’ violent threats, and have characterized the speech as a fabrication (Chardon, 1970, pp. 124-125, p. 316, fn. 486; Dollar, 1977, pp. 31-32).

For the sake of argument, let’s stipulate that the Four Bears speech is authentic. Four Bears laments the deaths of his compatriots, and his own impending demise from the smallpox he has contracted. He understandably blames the whites for bringing the disease among his people. No one who has ever commented on this outbreak has denied that the disease was brought to the Mandans on the steamboat, and can thus be attributed to importation by white Americans. But this does not support Churchill’s genocide conspiracy tale in the slightest. Four Bears never mentions the U.S. Army, never mentions smallpox blankets, and gives no indication of any violation of quarantine by Army doctors. In short, there is nothing in the Four Bears speech that substantiates in any way the fabricated elements of Churchill’s tale of smallpox blanket genocide by the U.S. Army.

In 1949, Jefferson B. Smith related Mandan oral history as told to him. Smith was the tribe’s main spokesman at that time, and was a highly respected elder. He was old enough to have heard the story from Indians who were eyewitnesses to the 1837 epidemic. According to Smith:

It is a common knowledge among our older people that on or about the year 1837 a boat drifted down the river bearing some white men, one of which was allowed to remain at an Indian village. He had smallpox. Ravages of the disease nearly exterminated the tribes.24

Here again, oral history from the afflicted tribes contradicts Churchill’s tale of genocide by smallpox blankets. Instead, oral history clearly corroborates the theory of transmission by human contact that is believed by all modern historians and epidemiologists who have studied the 1837 epidemic.

Marilyn Hudson is currently the tribal historian and director of the tribal museum. Hudson’s historical essays also contradicts Churchill’s tale. While Hudson is critical of the federal government’s slow response in sending additional vaccine, she never once mentions anything about smallpox blankets or genocidal Army doctors. Instead, she reiterates Jefferson Smith’s story of how the outbreak occurred (Hudson, 2004).
Conclusion

When every qualitative error in a book is an error in the direction of the book’s thesis, you have prima facie evidence of fraud. Ralph Luker

After situating Churchill’s rendition of the epidemic in a broader historiographical analysis—including the scholarly literature, folk traditions, and Indian oral history—one must reluctantly conclude that Churchill fabricated all of the central details of his genocide story. Churchill also falsified the sources he cites in support of his genocide charges, sources which say the opposite of what Churchill attributes to them. Moreover, we must conclude that falsification and fabrication are habitual with Churchill. This essay has analyzed not much more than three cumulative pages of Churchill’s writing, drawn from across six different essays. (Since Churchill published his second version at least twice, this adds up to at least seven different publications.) Within those few pages, Churchill has committed multiple counts of research misconduct—specifically, fabrication and falsification.

It is a distressing conclusion. One wants to think the best of fellow scholars. The scholarly enterprise depends on mutual trust. When one scholar violates that trust as a matter of habit, it damages the legitimacy of the entire academy.

The standard of proof given by the federal law defining research misconduct is “preponderance of evidence”—the evidence that has the greater weight or produces the stronger impression in the minds of triers of fact. In other words, had Churchill been federally-funded, the hearing examiner would ask: Is it more likely that Churchill has deliberately falsified his sources and fabricated evidence, or is it more likely that Churchill’s misrepresentations were accidental or otherwise justifiable? This legal standard of proof does not require one side of the case to conclusively defeat the other side. Instead, it requires only that the triers of fact determine which case is stronger.

Keeping this standard of evidence in mind, the triers of fact might ask: Are there any plausible defenses to the charges outlined in the essay above? And if so, what evidence would Churchill need to bring to overcome the evidence arrayed against him?

First, Churchill could argue that his misrepresentations of his sources were simply honest mistakes, and thus not research misconduct. However, a close examination of Churchill’s larger body of work will make it clear that misrepresenting sources is a habit with Churchill. Churchill’s habit has been demonstrated in this essay, by John LaVelle (1996; 1999) in two peer-reviewed journal publications, and by other authors as well (Vaughan, 2005; Lewy, 2004). An act that is habitual cannot be reasonably construed as an honest error, unless it is committed by a person who is grossly incompetent. Furthermore, when Churchill’s errors have been pointed out by other scholars, his response has been to engage in new fabrications and falsifications. This is a strong indication that Churchill’s smallpox blanket tale was a deliberate attempt to deceive, and not an honest error. Honest scholars acknowledge their errors. They don’t engage in new misconduct to cover up past misconduct.

Second, Churchill could bring forth hitherto undisclosed evidence. However, even if Churchill’s new evidence substantiated his genocide accusations in full, it would not change the fact that Churchill misrepresented his original citations, and failed to disclose that his cited sources arrive at the opposite conclusion to his own, and contain much evidence that disconfirm his claims. No matter what new evidence Churchill brings, he remains guilty of falsifying the sources that he has already cited.

Third, Churchill could argue that he is engaging in speculation from his sources, and thus there is only a difference of opinion, not research misconduct. However, in the specific counts described in this essay, any literate person can read
Churchill’s source and immediately see that Churchill’s extrapolation from that source is fantastic. Such fantastic speculation may not in itself constitute research misconduct. But when Churchill fails to disclose his extreme speculation from his sources, and winds up taking a position opposite that of his sources without acknowledging that divergence, then he is engaging in falsification.

In summary, when you consider the various defenses that Churchill could employ, and compare them to the evidence against him, the only possible conclusion is that Churchill has committed research misconduct. Using the “preponderance of evidence” standard of proof, there is little or nothing in the way of new facts that Churchill could bring to the table that would exonerate him.

After this close reading of Churchill and his sources, it is time to step back and look at the big picture. What Churchill has done, in at least five different essays, is to accuse the U.S. Army of committing genocide against the Mandans by deliberately giving them smallpox-infested blankets. Scholars can and do make honest errors. But honest scholars do not invent historical characters who never lived and events that never happened.

Tailoring the facts to fit one’s theory constitutes neither good science nor good journalism. Rather, it is intellectually dishonest and, when published for consumption by a mass audience, adds up to propaganda. Ward Churchill. 36

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Did the U.S. Army Distribute Smallpox Blankets to Indians?—Brown

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Notes


3 The CU committee’s report (Wesson et al, 2006) bears some striking parallels to this Plagiary article. This is probably explained by the fact that I submitted a working draft to CU’s Standing Committee on Research Misconduct in September 2005, before the investigative committee was formed. I would also note that this article was submitted to Plagiary and accepted for publication before the CU report was made public. References herein to Wesson et al. were added during the final revision.

4 Pilcher’s letters are dated June 10 and July 1, 1837. The letters do not appear to have reached Clark in St. Louis until the fall of 1837, due to the lack of reliable mail service given Pilcher’s location beyond the frontier. In M234, Roll 884, Letters Received by the Office of Indian Affairs, 1824-1880, Upper Missouri Agency, 1824-1874, National Archives (hereafter cited as “National Archives”).

5 Letter from Pilcher to Clark, February 27, 1838, National Archives.

6 See Fulkerson letters to William Clark for 1837, especially his annual report of October 1, 1837, and Fulkerson’s accounting records for 1836 and 1837, National Archives.

7 Letter from Pilcher to Clark, February 5, 1838, National Archives.

8 Letter from Fulkerson to Clark, September 20, 1837, National Archives.

9 Pilcher to Clark, February 5, 1838, National Archives.


11 Churchill’s footnote is in support of a separate passage in the book—not in support of the first passage quoted from this book, which Churchill left unsourced.

12 This journal is a web publication without page numbers.
Churchill argues that the Mandans were middlemen in the buffalo robe trade, cutting into the fur traders’ profits. This is a new claim on Churchill’s part. In Churchill’s previous versions, he never bothered to establish a motive for his fictional genocide. Now in this version, Churchill seems to be arguing that the U.S. Army committed genocide against the Mandans on behalf of the fur company’s business interests. However, Churchill’s own source—R. G. Robertson—makes clear that while the Mandans did function as a trading entrepot in the 18th century, by 1837 that trade pattern had been extinct for a half century. The Mandans sold furs directly to the traders just like the other tribes. Thus Churchill’s new motive would appear to be an unsubstantiated fabrication. Churchill’s failure to disclose that Robertson disconfirms this new fabrication constitutes falsification of Robertson.

Churchill cites Tucker (2001) to support his contention that: “By about 1750, the whole English army had been inoculated against smallpox.” There is no such contention in Tucker. Churchill’s contention about “the whole English army” is a fabrication, and a falsification of Tucker.

Thorton, p. 95. The estimate of fewer than 25,000 total dead was calculated by adding up all of Thorton’s highest specific estimates for each individual tribe, and allowing for a generous interpretation of Thorton’s rougher estimates of “several thousand” and “over one-half of 8,000.”

Chardon was known as the bourgeois of Fort Clark, “bourgeois” being the term used at that time for the executive officer of a fur trading outpost.

Even the most superficial Google search will turn up the “Fort Clark Trading Post State Historic Site” web page, or the “Fort Union Trading Post National Historic Site” web page.

Edwin Thompson’s typed transcription of Larpenteur’s manuscript journal, pp. 162-163. This passage was not included in the published version of Larpenteur’s journal.

Fort Union was about two hundred miles northwest of Fort Clark. Dollar’s “thousand miles” estimate probably assumes that the nearest doctor was in St. Louis, which is about a thousand miles away.

Churchill’s (2005b) letter to Lamar University was in the form of a complaint against me, after I had publicly criticized Churchill’s fabrication of his Mandan genocide tale. The letter includes five pages in which Churchill attempts to defend his Mandan smallpox blanket tale. In the letter, Churchill also demands that Lamar University remove my essay from my own faculty web page.

First, Robertson (p. 225) reports that Dr. Martin traveled from Fort Kiowa to Fort Pierre—not Fort Union—in 1832—not 1833. There is no evidence that Dr. Martin visited Fort Union, nor does Robertson describe him as an “Army surgeon” or anything of the sort. This is one more example of Churchill’s carelessness with the facts reported by his sources. Second, Robertson does report on that page that an Army major and a detail of troops “escorted a physician and some cowpox vaccine as far as Fort Union” in 1832. Whether this second, unnamed physician was in the Army or not is not specified. So here we see Churchill falsifying Robertson in several different ways. This is new falsification on Churchill’s part, on top of his published falsifications.

“Rees” is how the traders referred to members of the Arikara tribe.

Churchill is arguing with Steven Katz over what Churchill labels “Holocaust exclusivity”—the notion that the WWII genocide perpetrated by the Nazis is unique in world history. Churchill labels Katz a “denier” for holding to this view. Churchill argues that the American Indian experience in the U.S. is a comparable genocide. This suggests a motive for Churchill’s invention of his Mandan smallpox blanket myth.

The Office of Indian Affairs was organized under the purview of the War Department. It remained there until 1849, when the federal Department of the Interior was created.
Furthermore, there is evidence that at least one package of vaccine was transported beyond the Vaccination Act boundaries set by Secretary Cass. An Army major “escorted a physician and some cowpox vaccine as far as Fort Union” in 1832 (Robertson, p. 225; Trimble, 1992, p. 261). This was part of the federal inoculation program. This data point does run counter to Pearson’s hypothesis of hostile relations.

Diane Pearson thoroughly documents how the U.S. government implemented the vaccination program for Indians begun in 1832. Pearson writes, "By the end of 1839 … the estimated minimum total of administered vaccinations is 38,745" (p. 15). This minimum estimate does not include vaccinations conducted under treaty agreements, nor does it include vaccinations from the Western superintendency. Pearson estimates the upper limit at “around 54,416” Indians vaccinated by the federal government (p. 17). This “upper limit,” however, does not include the many vaccinations given by representatives of the fur trading companies and other private initiatives. While Pearson is extremely skeptical about the government’s motivations, and critical about the efficiency and objectivity of the vaccination program, nowhere does she support Churchill’s contentions whatsoever, that vaccine languished in storerooms, much less that the Army gifted smallpox blankets to purposefully infect Indians. Pearson effectively puts the lie to Churchill’s “storeroom” fabrication by describing and documenting the vaccination program in detail, and enumerating the many thousands of vaccinations given to a variety of tribes. There is overwhelming evidence that the inoculation program was widely implemented. Meanwhile, Churchill offers no evidence at all to support his claims that the Army hoarded vaccine in storerooms, and that vaccine was available at Fort Clark in 1837 but withheld by Churchill’s fictional post surgeon.

Churchill never names William Fulkerson in his published versions, probably because Churchill’s only primary source is Chardon, which does not refer to Fulkerson by name, but instead refers to him as the “Agent for the Mandans” in his entry for June 20, 1837 (Chardon, 1970, p. 118). More recently, Churchill’s (2005b) defense of his initial fabrication appears to be indicting said agent as part of the genocidal conspiracy.


“My youngest son died to day,” wrote Chardon in his journal entry for Sept. 22, 1837 (Chardon, p. 137); also see Chardon, fn. 478, pp. 315-316.

See records of the Western Superintendency for 1837 passim, especially the letters from Fulkerson to Clark, especially Fulkerson’s annual report, October 1, 1837.

Ibid.

Churchill appears to be attempting to undermine the stolen blanket story related by Fulkerson and Chardon by citing Robertson. But Robertson does not debunk the stolen blanket story. Citing a secondary source (Dollar, 1977), Robertson reports that William Clark, Fulkerson’s superior, had doubts about the veracity of Fulkerson’s letter to him in September 1837 (p. 299). Dollar (1977) wrote that Clark “suspected the veracity of the letter’s content” (p. 33). But Dollar’s reading of the primary source is speculative, and dubious. The primary source—a letter from Clark to his own superior—shows that Clark did not dispute the veracity of the “intelligence” that Fulkerson provided, but simply doubted that Fulkerson had visited his sub-agency since the summer. Clark never questioned the veracity of the stolen blanket hypothesis. (William Clark’s letter to C.A. Harris, Commissioner of Indian Affairs, February 6, 1838).

This theory of the Blackfeet infection was corroborated by William Fulkerson in his letter to William Clark on September 20, 1837, National Archives.

Testimony of Jefferson B. Smith, official delegate of the tribal business council of the Three Affiliated Tribes, Fort Berthold Indian Reservation,
Did the U.S. Army Distribute Smallpox Blankets to Indians?—Brown

North Dakota, Hearings before the subcommittee on Indian Affairs of the Committee on Public Lands, House of Representatives, 81st Congress, First Session on H.J. Res. 33, April 29, 30, May 2 and 3, 1949, pp. 69-70.


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