

ROLE OF VACCINATION OFFICER

Smallpox during the 19th century was a very common and devastating disease, killing many, and survivors could be scarred and debilitated for life, or blinded.¹ The Vaccination Act of 1853 made it compulsory for all children to receive the vaccination against smallpox within the first 3 months of life, and it was the responsibility of the Poor Law authorities to implement vaccination. Defaulting parents received a fine. The 1867 Vaccination Act extended the scope up to the age of 14 and also specified the creation of the new post of Vaccination Officer to co-ordinate enforcement and notification of defaulters. Guardians were required to proceed against parents of unvaccinated children, and now defaulters could now be fined multiple times until the original default was remedied. In 1871, when there was a smallpox epidemic in Europe, which quickly spread to the UK, it became mandatory for vaccination officers to be appointed by all local authorities.² The tenure of the Vaccination Officers, once appointed, held the office until they either resigned, were proved insane, or died, or the Guardians specified their removal.³

From the start of compulsory vaccination, there was opposition for a number of reasons – because people objected to the compulsory nature which was seen as an infringement of civil liberties, government interference, that poor-law employees would be monitoring and treating non-paupers, and also due to reported and observed damaging side effects. Anti compulsory vaccination societies formed (e.g.: The Leicester Anti-Vaccination League in 1869, The Anti-Compulsory Vaccination League in London in 1866), and in some cities there was mass rejection of vaccination, notably Leicester and Gloucester. Following a refusal for easing of prosecutions of defaulters in Leicester (over 1000 prosecutions in 1881), there was a mass protest in 1885. At this point Leicester had controlled the disease by a strict system of notification and quarantine, and improved sanitation. However, they were badly hit when the disease struck in the early 1890s. Eventually the opposition led to the formation of a Royal Commission to examine the pros and cons, which reached the decision in 1897 that people should be allowed to opt out for moral reasons.⁴

Although the Vaccination Officer did not perform the procedure himself, he was responsible for ensuring that all children born in his area received a vaccination.

Monthly lists of births and deaths of infants under 12 months in the district were provided by the Registrar to the vaccination officer. The vaccination was performed by a qualified medical practitioner, performing 'arm to arm' inoculation by means of 4 or 5 pricks. Persons vaccinated or revaccinated were required to attend the medical officer 8 days after the vaccination to be checked for its success. The inoculation points should rise into lymph filled vesicles, and it was content from these that was used to inoculate unvaccinated infants attending on the same day.

The public vaccinator (often the Medical Officer of Health) kept a register of all cases performed by him to present to the Board of Guardians, and also passed on the relevant signed certificate to the Vaccination Officer. It was the parent's responsibility to pass on the certificate if they used a private doctor. In addition to vaccination certificates, there were certificates for unfitness (valid for 2 months, after which the child was re-examined) or insusceptibility (if a child had already suffered smallpox, or the vaccination was unsuccessful on 3 successive occasions, they were no longer required to have a vaccination). No fee was payable for registration of certificates, but a fee was liable for conducting searches in the register (unless the search was requested by the public vaccinator, officers of the Poor Law, or council authorities).

The Vaccination Officer had to account for any fees received as specified by the Vaccination Acts, and at specified intervals deposit them in the central fund the Guardians used to expense their vaccination responsibilities.

The Vaccination Officer was responsible for finding out about unvaccinated children whose births had escaped registration, or who had moved in from other districts, serving them with notices to be vaccinated and duly following up, as with all other children.

He also had to return the vaccination statistics, together with the names of defaulting children twice yearly to the Guardians.

The Guardians were permitted to pay their appointed vaccination officers to prosecute any person defaulting or other offences against the act.⁵ In Guildford, Henry Portsmouth reported to the Boards of Guardians meetings the cases he had taken before the magistrates for disobedience to the Vaccination Acts since the previous meeting, and what the outcomes were. He was also responsible for recovering the fines.

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¹ Victorian Health Reform, The National Archives, <https://www.nationalarchives.gov.uk/education/resources/victorian-health-reform/>

² Dorothy Porter and Roy Porter; The Politics of Prevention: Anti-Vaccinationism and Public Health in 19th Century England; *Medical History*, 1988, 32 pp. 231-252, <https://www.cambridge.org/core/services/aop-cambridge-core/content/view/160A0FE00C0D60AC0AF87DCC3D444523/S0025727300048225a.pdf>

³ Danby Palmer Fry, Arthur Frederick Vulliamy, *Fry's Laws of Vaccination*; Pub: Knight, 1899; https://www.google.co.uk/books/edition/Fry_s_Laws_of_Vaccination/gZEAaAAAAYAAJ?hl=en

⁴ Anti-Vaccination League, Wikipedia: https://en.wikipedia.org/wiki/National_Anti-Vaccination_League , The anti-vaccination movement that gripped Victorian England, BBC News Leicestershire, 2019: <https://www.bbc.co.uk/news/uk-england-leicestershire-50713991>

⁵ The Vaccination Act 1867, and the Vaccination Act 1871; with introduction, notes, and index by Algernon C. Bauke, 1871. Wellcome Collection, <https://wellcomecollection.org/works/x7k54du4/>