Part Four of *The Plague* recounts how the plague impacts the lives of people in Oran during its deepest moments. The crisis requires people to consider their role in creating and contributing to a just society.

There are six stand-alone activities in this section that can help meet Saskatchewan’s English B30 curriculum indicators.

- **Historical Context: A Closer Look at the French Resistance** deepens the historical and political context of *The Plague*.

- **Health Concepts: A Brief History of Vaccines** builds on ideas about the scientific method, as well as deepening understanding of the medical science behind the book.

- **Health Concepts: Vaccine Hesitancy and the Law** expands on the concept of vaccines, while opening up consideration of how the law balances the needs of the public as a whole with some people’s individual desires.

- **Historical Context: World War II Internment Camps** continues building on the historical context of *The Plague*, while also deepening student concepts of justice.

- **Think Local: Pandemics and Prisons** presents another way that society has evolved since *The Plague* was written, as well as opening up considerations of how students can continue to develop their sense of justice.

- **The Philosophy of Camus: The Death Penalty** builds understandings of Camus’ philosophical beliefs that underpin *The Plague*, while advancing considerations about the uses and limits of violence as a means for achieving change.

With the broader philosophical, historical, health, and literary ideas that shape *The Plague* established in Parts One through Three, Part Four allows for deeper application of these ideas as they appear in the novel.
Part Four • Chapter 1

Rieux finds he is becoming overrun with emotions, and feels he should correct this.

1. Grand’s workload begins to strain him.
   a) What kinds of “fixed ideas” (154) does Grand look to in this time?
   b) How does looking forward and looking back in such a way help people get through difficult moments?

2. Rieux’s role as a doctor changes, from saviour to public health enforcer. He now “came accompanied by soldiers, and they had to hammer on the door with rifle-butts before the family would open it” (156). Why would people not want to let doctors into their homes?

3. Are Oran’s doctors properly following all health precautions?

4. Cottard is in a state of contentment, not revolting against the plague. Review Tarrou’s notes “Cottard and his Relationship with the Plague.”
   a) How has Cottard changed from when we first met him in Part One Chapter 2?
   b) Do people who are hurting thrive in a world of hurt?

5. Cottard and Tarrou watch a performance of Gluck’s Orpheus, an opera about a rescue mission from hell. After surviving hell, the actor playing Orpheus collapses on stage. He appears to be stricken by plague. Consider this scene. What is being said about the power of the plague?
Part Four • Chapter 2

*Rambert decides to stay in Oran to fight the plague.*

1. The magistrate, Monsieur Othon, hints that Rambert needs to be careful about attracting attention to himself.
   a) Is Othon becoming sympathetic to the sanitary squads?
   b) Police can issue warnings instead of pursuing formal charges for many less serious crimes. Judges have similar options if a person is found guilty of many less serious offences. Why must the legal system provide the police and judges with some discretion to use personal judgment?

2. Tarrou says “At my age one’s got to be sincere. Lying’s too much effort” (168).
   Do you agree? Is it easier to just tell the truth?

3. What does Tarrou say about the effectiveness of masks? Is this true for *Y. pestis*?

4. Rambert decides to stay in Oran and fight the disease, instead of escaping to Paris to be with the lady he considers his wife. He says “if he went away, he would feel ashamed of himself” (170). Consider Rambert’s actions. Can you be happy if you leave others to suffer?

5. In 1943, Camus was living in the French mountains, surrounded by resistance activities. He then moved to Paris to continue resistance activities, instead of trying to escape to Oran to be with his wife. What does this tell us about how a writer’s life shapes their fiction?
Oran’s sanitary squads are an allegory for French Resistance cells. By the close of Part Four Chapter 2, most of *The Plague*’s main characters have joined the squads. Those who join the fight see it as something that extends beyond personal self-interest: as the narrator says when plague first breaks out, fighting it is “the concern of all” (111). This point is later reinforced by Rambert, when he comes to realise that “this business is everybody’s business” (170).

The characters involved in the squads come from different segments of society, yet another indication of how the fight is everybody’s business. Dr. Rieux and Dr. Castel are part of the professional class. Father Paneloux is a member of the clergy. Grand is a civil servant. Rambert is a journalist and, like Tarrou, an outsider who is unwittingly caught in the outbreak. Monsieur Othon is a magistrate who grows sympathetic and eventually joins the squads once his son dies from the disease. There are even Spaniards helping out the cause.

The French Resistance was much more diverse than Camus’ cast of characters. Though predominantly made up of young people, its members came from all corners of society. Name most any social class, profession, religion, economic class, age, gender, sexual orientation, ethnicity, or any other sub-category of society, and you could probably find a resister who fits that description. Some resisters joined early, others had supported Vichy but then switched sides.

Resisters shared a common bond: opposing Nazi Germany and its Vichy collaborators. Their acts of resistance were just as diverse as their human characteristics. Resistance could be as simple as raising a French tricolour flag. Resistance could be as complex as creating and implementing plans to destroy key manufacturing or transportation infrastructure. Some resisters built and maintained networks of escape routes for stranded Allied soldiers and individuals fleeing persecution. Other resisters spied and provided intelligence to the Allies. A few resisters wrote propaganda to strengthen support for the cause. No matter their actions, the one commonality these actions shared is that they happened underground and in the shadows, to avoid detection by the authorities.
Leadership and Organisation

The leadership of the Resistance is often attributed to a young French general, Charles de Gaulle. De Gaulle rejected France’s armistice with Germany. He fled to Britain in June 1940 and set up a government-in-exile, known as Free France.

When de Gaulle left for the United Kingdom, he was a junior minister in the French government. Unlike some other countries whose major figures took refuge in the UK when their governments were toppled, no other members of France’s government came along. This put de Gaulle’s leadership on shaky ground. Despite a rocky relationship with many Allied leaders, he gradually established his authority. De Gaulle helped the Allies take France’s overseas colonies back from the Vichy government, and he then played an important role in pushing the Nazis out of France.

One reason why it is difficult to call de Gaulle the leader of the Resistance is because the Resistance had no formal leadership, at least in the early years. It was a collection of countless loosely-organised small groups, much like the sanitary squads in *The Plague*. For resisters, it was dangerous—if not impossible—to centrally organise. Instead, resisters intermingled behind the scenes, forming a massive informal web.

Underground pamphlets and newspapers helped keep this informal web connected, especially in the early years. These publications provided information and editorial guidance. Camus became the editor of a leading Resistance newspaper, *Combat*, in 1944.

Some official guidance came from the BBC. Their *Radio Londres* service was the voice of de Gaulle’s Free France. It spread news and coded messages across France. Often, BBC broadcasts included instructions for Resistance fighters.

The loose connections of Resistance fighters and de Gaulle’s Free French were brought closer together when the Allies took France’s African colonies from Vichy. Free France established a government in Algiers. Their strengthened position on French territory helped to organise the Resistance. De Gaulle further fortified his government’s authority by negotiating positions within it for French Communists. Including Communists in the Free French government helped build solidarity between diverse political groups.

The Resistance itself became more formalised with the creation of the *Conseil National de la Résistance* (National Council of the Resistance) in 1943. It was a collection of resistance groups, political parties, and trade unions united in their opposition to the Nazis and Vichy. The council’s formation lead to better-coordinated resistance, providing guidance from the top. It also gave formal recognition to
de Gaulle as their leader. By 1944, Resisters on the ground in Nazi-occupied France were renamed the *Forces Françaises de l’Intérieur* (French Forces of the Interior).

Nonetheless, the formal structuring of the Resistance that began in 1943 did not mean that all resisters marched to the beat of a single drum. De Gaulle may have become its “leader,” but in reality the Resistance remained loose and at times unwieldy. Each group of resisters on the ground still needed to operate in the shadows, and largely independently, in order to escape detection. So while they had stronger leadership as the war progressed, right up until France’s liberation, they were a diverse group most tightly-bonded not by their leadership but by their singular belief: that ousting Vichy and the Nazis from France was, as Rambert put it, “everybody's business.”
Discuss

1. Consider the diverse make-up of the French Resistance.
   a) In the face of a common enemy, do we need to put aside our differences?
   b) What compromises to your values would you be willing to make in the face of a common enemy?

2. The Archbishop of Toulouse, Jules-Géraud Saliège, engaged in a famous act of resistance. On August 23rd, 1942, he denounced France’s internment camps:

   In our diocèse, terrible scenes have taken place in the camps of Noe and Recebedou. Jews are human beings. Foreigners are human beings. All things cannot be done against them, against these men, against these women, against these fathers and these mothers. They are part of the human race. They are our brothers as so many others are. A Christian cannot forget this.¹

   Resisters made hundreds of thousands of copies of his message, and it quickly spread across France.
   a) Think about this message and how it was spread about. What does this tell us about how resistance activities functioned?
   b) Is resistance only accomplished through “great acts” by “great people”?

Part Four • Chapter 3

Dr. Castel’s anti-plague serum is tested on Monsieur Othon’s son Jacques. The boy dies, but his prolonged death suggests that Castel is making progress on developing a serum.

1. When Othon’s son is diagnosed with plague, the Othons are sent to isolation camps. Quarantine was used to reduce the spread of plague.
   a) How does Othon react when told he will have to stay at a shabby tent camp at the Municipal Sports Grounds?
   b) What would happen to society if the people who uphold the law believed that they should be exempt from the law?

2. Rieux believes that young Othon’s case is hopeless. He thinks that there is nothing to lose by trying Castel’s experimental serum.
   a) What is Paneloux’s observation about trying the serum on the boy?
   b) Discuss the ethics of Rieux’s decision. Is it the right thing to do?

3. Consider the discussion between Paneloux and Rieux that closes the chapter.
   a) What unites the two men?
   b) Where do the two men differ?
   c) How is their disagreement similar to the make-up of the French Resistance?
A Brief History of Vaccines

In *The Plague*, Dr. Castel works to develop a plague serum. Castel’s colleague, Dr. Rieux, believes that without a serum, there is little that doctors can do to halt the plague:

Towards the close of October Castel’s anti-plague serum was tried for the first time. Practically speaking, it was Rieux’s last card. If it failed, the doctor was convinced the whole town would be at the mercy of the epidemic, which would either continue its ravages for an unpredictable period, or perhaps die out abruptly of its own accord. (172)

In the past, before the discovery and widespread use of antibiotics, plague serums could be effective tools for fighting *Y. pestis*.

The first time plague serum was used was in 1896. Alexandre Yersin, the person who discovered the *Y. pestis* bacteria, gave a plague serum to 23 sick patients in Hong Kong. Only two died. For a disease with almost certain mortality, this was a great success. Unfortunately, Yersin’s subsequent uses of plague serum were not always as successful.

Plague serums were often developed from the blood of horses who were immune to plague. The horse blood contained antibodies, able to fight off the disease. By injecting patients with the horse’s plague-fighting antibodies, the patient had a much better chance of overcoming the disease.

Serum injections were also used to provide healthy people with short-term immunity to plague. The injected antibodies could remain in the body for a few weeks or maybe even a few months, fighting off infections. However, serums cannot provide long-term immunity. To obtain long-term immunity to diseases such as plague, vaccines are needed.

The Development of Vaccines

Vaccines work differently than serums. A vaccine usually involves the injection of a dead or weakened disease organism (or parts of it) into the body. The injection prompts the body to start developing its own antibodies to fight off that disease. Because vaccines train the immune system to create its own antibodies, vaccines
provide long-term immunity to diseases. Put simply, vaccines protect us from disease.

Before vaccines, there only was one accepted way to immunise people: a process called variolation. Variolation was used to give people immunity to one particularly deadly disease: smallpox. The procedure originated in China, and knowledge of it moved its way westwards as trade and travel expanded. Reports of variolation in Europe and Africa date back to at least the 1600s. Meanwhile, African slaves brought their knowledge of the procedure to the present-day United States in the early 1700s.

To variolate a person, pus from a smallpox lesion was taken from a patient, and then scratched into a healthy person’s skin. Another method had doctors blow dried smallpox scabs up people’s noses. For reasons still not entirely understood, the exposure would only spur a mild case of smallpox. The mild smallpox infection would train the immune system to develop antibodies to the disease.

Unfortunately, variolation was not perfect. Sometimes people developed full-blown smallpox, leaving them seriously ill or even dead. Other unlucky recipients contracted diseases such as syphilis or tuberculosis, if the smallpox pus came from a person carrying such diseases. Further, people who contracted mild smallpox through variolation were contagious while the disease ran its course. Without careful isolation, they could spread the disease. Still, the death rate from variolation was usually no more than 2%, a far cry from the 20-60% mortality rate of a serious smallpox outbreak.

Variolation quickly spread across 18th-century England. One recipient was an eight-year-old boy named Edward Jenner. Knowing the risks of variolation, in 1796, Dr. Jenner set out to develop a better way to immunise people from smallpox.

English farm folklore had it that milkmaids who contracted cowpox—a comparable but much milder disease—would never contract smallpox. Similar tales had been floating around India for centuries. By the mid-1700s, most people believed that there was truth to these stories. Jenner wanted to prove it.

When Jenner diagnosed Sarah Nelmes, a local milkmaid, with cowpox in May 1796, he saw his chance to see if cowpox would make people immune to smallpox. Jenner took pus from her cowpox lesion, and exposed his gardener’s son to it. The boy developed mild cowpox. A few weeks later, he exposed the boy to smallpox. The boy did not come down with the disease. It appeared that controlled exposure...
to cowpox would provide immunity to the much more dangerous and disfiguring smallpox. Jenner called his innovation a vaccine, after the Latin word for cow, *vacca*.

Jenner spread the word about his vaccine. In 1797, he submitted a short paper describing his work to the Royal Society, the United Kingdom’s national academy of sciences. The Royal Society rejected the paper. Not dissuaded, he performed more scientific experiments to verify his findings. Then, in 1798, he published *An Inquiry into the Causes and Effects of the Variolae Vacciniae, a disease discovered in some of the western counties of England, particularly Gloucestershire, and known by the name of “The Cow Pox.”* He travelled to London to promote his findings. Doctors were impressed and passed along the news to their colleagues. In a few short years, the smallpox vaccine spread across much of the world.

Realising the enormous public health benefits of vaccinations, Bavaria, Sweden, Denmark, and Norway created mandatory smallpox vaccination laws by 1821. England banned variolation in 1840 and made infant vaccination compulsory in 1853. And several American states, beginning with Massachusetts, mandated that people be vaccinated. Vaccination worked so well that, following a 20th-century global vaccination effort, smallpox disappeared entirely. And so the end came for a disease once responsible for one out of every twelve deaths. Today, only lab specimens remain in the United States and in Russia.

To be sure, Jenner's accomplishment is not the story of one person. His work built on centuries of prior knowledge and experimentation, across many cultures. And Jenner was not even the first person to immunise people using cowpox. During a 1774 smallpox outbreak in Downshay, England, a farmer immunised his family using a haphazard mix of a knitting needle and a neighbour’s cow. As well, similar procedures were tried in France in the late 1700s. Nonetheless, Edward Jenner’s understanding of past knowledge, his use of the scientific method of controlled and reproducible experiments, and his dogged determination to promote his discovery, gave him a place in history as the person credited with creating the vaccine.

**Germ Theory**

For the most part, Jenner’s smallpox vaccine worked. Yet, experts—Jenner included—were unsure about how it worked. It took over sixty years for the next great breakthrough in vaccine science. In the mid-1800s, there was a great French-German scientific rivalry. French scientist Louis Pasteur and German scientist Robert Koch were often in competition with each other, building upon each others’ discoveries. Their work led to the creation of modern vaccines.
In Pasteur’s day, the general belief was that disease spread through miasma, or putrid air. In 1857, Pasteur proposed something different: germ theory. Germ theory is the idea that small microorganisms are responsible for disease. Pasteur was not the first person to propose a theory about germs causing diseases. However, he was the first person to demonstrate through replicable experiments that particles in the air—and not the air itself—were the problem.

Koch picked up on Pasteur’s work, and began to isolate and identify particular germs that caused particular diseases. Koch also recognised that antibodies built up our immunity to diseases.

With germs such as rabies, anthrax, and cholera now identified, Pasteur was able to weaken them and inject them into animals. The results of Pasteur’s experiments changed the course of history: if you vaccinated an animal with weakened germs, the animal would develop immunity to that disease. Because humans are animals, the same principle applied.

By discovering how Edward Jenner’s smallpox vaccine worked, Pasteur and Koch paved the way for countless vaccines. Tetanus, typhoid, influenza, measles, mumps, and rubella are just a few diseases we have tamed through vaccines.

**Back to Oran**

In The Plague, Dr. Castel’s serum may be the last hope for halting the disease. But Castel is not starting from nowhere in his attempts to develop a plague serum. Rather, his work built on centuries of knowledge from people and cultures around the world. The history of vaccine development shows us that cooperation, sharing, and the occasional bit of competition all play a role in advancing society. The simple truth is that very few discoveries are the result of the work of a single person, a single time, or a single society.
1. English intellectual Francis Galton said “In science, credit goes to the man who convinces the world, not the man to whom the idea first occurs.” What does this quote tell us about the role of storytelling in science?

2. People or companies who make new discoveries or innovations can apply to patent their innovations. A patent gives the inventor—and only the inventor—exclusive rights to use and sell their innovation. In Canada, a patent lasts for 20 years.
   a) Jonas Salk, inventor of the polio vaccine, declined to patent it. He could have made a great deal of money. Instead, he made it free for anyone to use. How does Salk’s refusal to patent the polio vaccine reflect Dr. Rieux’s point in *The Plague* that “the only means of fighting a plague is – common decency” (136)?
   b) In *The Plague*, what would be the consequences if Dr. Castel successfully created a plague serum, then patented it?

3. Think about *The Plague*’s allegory of political extremists infecting France. Is there a serum or vaccine for people who fall for these wrong-headed ideas?

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The plague serum given to Othon’s son does not save his life. Its main effect is to slightly prolong the boy’s life. This suggests that Dr. Castel’s serum development is on the right track. Nevertheless, as Father Paneloux points out, using the serum on young Othon ultimately means that “he will have suffered longer” (175), as his death was agonising.

The failure of the serum to work and the agony it causes reminds us that medical science is not always perfect. Fears—justified or not—about imperfections in medicine are a reason why hesitancy and outright opposition to vaccines have always been with us.

The Origins of Vaccine Hesitancy

For as long as there have been vaccines, there have been people who have questions about or are outright critical of vaccines. Doctors sometimes call these people vaccine hesitant. In popular culture, they are often called anti-vaxxers. People with vaccine hesitancy exist across society. Their reasons for being hesitant are diverse.

Criticism of vaccines emerged alongside the introduction of the smallpox vaccine. At the time, medical science had determined that the smallpox vaccine worked. However, medical science did not yet understand how germs caused diseases. This lack of knowledge meant that vaccinations were risky, and performed with unsterilised equipment. Catching a disease from vaccination was a very real possibility.

Because of the risks, people were not wrong to ask questions. After all, the freedom we have in a liberal democracy to offer constructive criticism often works to make things better. That said, smallpox was painful, disfiguring, and often lethal. Most people weighed the risks against the benefits, and determined that vaccination was the best course forward.

Unfortunately, many people were not given a choice about vaccination. In the mid to late 1800s, Ontario, Quebec, England, and many American cities and states created mandatory vaccination laws.

The application of mandatory vaccination laws was often shameful, and minority communities—especially in the United States—frequently received the worst treatment. For example, a smallpox
vaccination raid in New York City’s Little Italy neighbourhood saw the police hold men down and vaccinate them against their will, while babies were torn from their mothers’ arms and sent to quarantine hospitals. Worse yet, in a Middlesboro Kentucky Black neighbourhood, people were vaccinated at gunpoint.

To many, mandatory vaccination was an overreach of state power, to say nothing of the uneven and cruel implementation. People began to organise and push back.

**England Changes Course**

In 1898, England recognised that forcing vaccinations upon people may be a violation of their rights. So the country moved towards a different approach to vaccination. To appease people who objected to mandatory vaccination, England added a “conscience clause” to its vaccination laws. The clause was vague, allowing people to be exempt from a vaccine so long as they could convince a magistrate that they had good reason to do so. The law popularised the term conscientious objector and spawned a widespread debate on what it meant to be one.

Conscientious objection took on many forms. Some people objected because of worries about catching diseases from vaccination. Others objected due to fears about vaccine ingredients. Some religious people joined in, concerned about body purity. And people opposed to animal experimentation added to the chorus.

Many of these issues were moral or ethical, and never fully settled. And to be certain, every medical procedure involves some level of risk. Nonetheless, as the 20th century progressed, it became increasingly clear that the benefits of vaccines far outweighed the risks. With almost everybody choosing to be vaccinated, countless dangerous and disfiguring diseases went into decline. No doubt vaccines were not the only factor in the decline of disease. Better sanitation systems, access to more nutritious food, stronger health and labour laws, and other scientific advances played a role. But the impact of vaccines cannot be missed.

**Vaccine Hesitancy Today**

With the horrors of so many diseases now forgotten, space has been created to capture the public imagination with vaccine risks. People no longer see children being disfigured by polio, suffering brain swelling from measles, or experiencing paralysis and death from diphtheria, for example. The result? More and more people are declining vaccines, which is leading to more and more disease outbreaks. This trend has led the World Health Organisation to declare anti-vaccination movements one of 2019’s top-ten threats to health.

No single personality trait or fact explains why people embrace vaccine hesitancy today. Just as a member of a small orthodox religious community may be hesitant because they accept the authority of their faith leaders, a member of a small “hippy” town may be hesitant because they reject the authority of government and large pharmaceutical corporations. And just as a member of a
minority community may be hesitant due to a history of unethical, racist medical experiments, a member of an affluent white community may be hesitant because of advice from a fee-based alternative medicine practitioner. Vaccine hesitancy is a complex mix.

Of course, some anti-vaccination beliefs are based in nothing more than conspiracy theories. Most conspiracy theories begin with a grain of truth, then quickly become unhinged from reality. Social media can push along conspiracy theories, as algorithms feed people information they already agree with. Add to that, people often bubble together in echo chambers, where they only hear self-reinforcing arguments from like-minded people. Together, in these increasingly narrow halls of discussion, far-fetched anti-vaxxer claims like “vaccines turn people into 5G antennas” can become some people’s “truth.”

**Canadian Law Today**

Canada’s vaccination-related laws carry on England’s legacy of conscientious objection. They attempt to balance the need for public health with the desire of some individuals to refuse vaccines.

Some provinces may require children to have certain vaccines in order to attend public school. As well, some health care facilities may require workers to be vaccinated against particular diseases, if they will be performing particular duties. And some vaccines may also be mandatory to enter a foreign country.

People generally may decline vaccinations for medical, religious or philosophical reasons. However, unvaccinated people may not enjoy the same freedoms as vaccinated people. For example, in the event of an outbreak of a particular disease, children who have not been immunised may be required to stay home from school. Similarly, health care workers who refuse a vaccine may face restricted duties in the event of an outbreak.

These are the kinds of compromises that society has agreed upon, when there are no mandatory vaccination laws. We are not required to be vaccinated, but we may have to compromise some of our freedoms if we make this choice.

**A Healthy Society**

According to the Public Health Agency of Canada, vaccines have saved more lives in the past 50 years than any other health intervention. Vaccines—in conjunction with better sanitation, access to more nutritious food, stronger health and labour laws, and other scientific advances—have freed us from many fatal and disfiguring diseases.

That said, just like the dramatic and horrible death of young Othon in *The Plague*, outlier events and sensational stories do occasionally happen. These events tend to stick in our mind and tug at our heart. They evoke our sympathy and compel us to demand better. This is especially true in an age of social media, where a single story can be picked up and amplified unlike any other time in history. However, a single story—no matter how compelling or important—cannot always be taken as a wholesale reflection of our collective reality.

Nonetheless, everyone with questions about their health care should discuss them with their health-care provider, to understand the risks and benefits of their medical procedures.
Discuss

1. Of the countless millions of vaccines given in Canada in 2018, only 221 people reported adverse affects, primarily allergic reactions. Why do we seldom tell the stories of the times things go well?

2. The most-discussed ruling on mandatory vaccination came from the United States Supreme Court, in 1905. In *Jacobson v. Massachusetts*, the court found that the health interests of the public as a whole—through compulsory smallpox vaccinations—outweighed the individual’s right to decline vaccines. Refusing a vaccine meant disease could spread, and individuals do not have an unfettered right to harm society.
   a) Do you think this ruling is fair? Why or why not?
   b) Would you support making COVID-19 vaccines compulsory for everyone? Why or why not?
   c) Would you support requiring people to have a COVID-19 vaccine if they wished to take part in certain activities? Why or why not?

3. Every medical procedure requires us to put our trust in others. What will happen if we lose our sense of mutual trust?
Part Four • Chapter 4

Father Paneloux delivers his second major sermon. In many ways it contrasts his first sermon: he is less certain about the plague's meaning. Nonetheless, Paneloux never abandons his belief in God, even though his faith seems to be shaken.

1. Paneloux engages in “the forefront of the fight” (180) against plague, now experiencing death firsthand. How is this different than Paneloux’s earlier understanding of death?

2. Pamphlets spouting utter nonsense about the plague begin to circulate throughout Oran, amplified by local printing firms who were “quick to realize the profit to be made by pandering to this new craze” (181).
   a) What kinds of things are being written?
   b) How does this reflect the spread of misinformation on digital platforms today?

3. Less people attend Paneloux’s second sermon than the first.
   a) What reasons are given?
   b) Can you think of other reasons why attendance is down?

4. Find a passage in the sermon you find significant, and discuss its meaning.

5. Following the sermon, an older priest says that “At Paneloux’s age, a priest had no business to feel uneasy” (187). What do you think? Should we become more certain of our beliefs as we age? Less certain? Think back to Camus’ idea of absurdism to help guide your thoughts.

6. a) Why would Paneloux refuse medical attention as he was dying?
   b) Paneloux’s illness is a “doubtful case” of plague. If Paneloux didn’t die of plague, what did he die of?
Part Four • Chapter 5

The plague reaches its peak. Life in Oran at this moment is examined, followed by a look into an isolation camp.

1. Read the description of life in Oran during the plague’s peak, in the opening pages of the chapter. How is this experience similar and different to the peak days of the COVID-19 pandemic?

2. The president of the isolation camp tells Tarrou “We’re great believers in efficiency in this camp” (198).
   a) Why does he say this?
   b) Is efficiency always a good thing?
In Part Four Chapter 5 of *The Plague*, Tarrou and Rambert tour an isolation camp. The camp is where citizens who may be contagious with *Y. pestis* are housed. Formerly a sports field, the isolation camp could be seen as an allegory for France’s World War II internment camps.

France had about 60 permanent and countless temporary internment camps during the war. The camps were located both in France and France’s African colonies. At the beginning of the war, these camps mainly held German prisoners. When Germany defeated France in 1940, the camps became places to hold Jews, Roma, communists, Resistance fighters, and other enemies or targets of the Vichy Regime.

When Germany was chased out of France, the camps were repurposed to once again hold German prisoners. But the end of the war did not bring about the end of the camps. When France went to war in northern Africa in 1954, trying to hold on to its colonial possessions, France used internment camps to hold independence fighters, and later interned large portions of the rural north African population.

Internment camps are a feature of war, and by no means was France the only country with them in World War II. Just as Germany and its allies created some 44,000 permanent and temporary camps, Britain and its allies—including Canada—built their own camps.

Some internment camps were built from scratch. But the necessities of war meant that time and supplies were limited. Hence, other camps were created out of existing buildings. Sports complexes, like Oran’s isolation camp in *The Plague*, were sometimes used because they could be quickly and efficiently converted.

### The Vél d’Hiv Roundup

One particular Paris sports complex, the Vélodrome d'Hiver or Vél d’Hiv for short, found frequent use as a temporary internment camp during World War II. At the outbreak, France interned German refugees in the Vél d’Hiv. In 1940, the complex held foreign women. In 1941, it housed Jews rounded up by French police. Then, in 1942, it was used for France’s largest single mass arrest and deportation of Jews. This notorious event is known as the Vél d’Hiv roundup.

The Vél d’Hiv roundup took place on July 16th and 17th, 1942. At Germany’s behest, Paris police arrested over 13,000 Jews, including 4,000 children. Almost all were foreign-born residents, or stateless refugees who had fled from persecution in other countries.
About 6,000 people were immediately sent to Drancy, a Jewish internment camp on the edge of Paris. The other 7,000-8,000 were squeezed into the Vél d’Hiv.

Vél d’Hiv was no place to house humans. Windows were screwed shut to prevent escape. Half of the bathrooms were locked, the other half out of commission. Aside from one water tap, food and water was not provided by the French: instead Quakers arrived to supply the captives. In the words of one eyewitness:

   It was like hell, like something that takes you by the throat and keeps you from crying out. I will try to describe this spectacle, but multiply by a thousand what you imagine, and then you will only have part of the truth. On entering, your breath is cut by the stinking air, and you find before you an arena black with people crowded next to each other, clasping small packages [of clothes, belongings, food]. The scarce toilets are blocked. No one can fix them. Each is obliged to do his or her business along the walls, in public. On the ground floor are the ill, with full waste containers next to them, for there aren’t enough people to empty them. And no water...'

For nearly a week, Jews suffered in the stagnant sports complex. Some committed suicide. Others tried to escape and were shot.

The Jews incarcerated in the Vél d’Hiv were next moved to transit camps. Transit camps were a kind of purgatory, holding people prior to their deportation to Germany’s extermination camps. In the end, almost every person arrested in the Vél d’Hiv roundup was killed at Auschwitz.

For years, France refused to take responsibility for the Vél d’Hiv roundup. The official position was that the French Republic was dismantled in 1940, and replaced by the illegitimate French State (Vichy France). However, in 1995 France’s president reversed that position, acknowledging this horror was committed by France.

**It Can’t Happen Here?**

The mass arrests, incarcerations, and deportations of Jews in France during World War II were completely inhumane. We like to think of such gross injustices as historical artifacts, at least for western liberal democracies like Canada. In many ways, this is true. As we have advanced as a society, Canadians have rejected such actions, and enshrined human rights through such laws as the *Charter of Rights and Freedoms*.

However, Canada has its own history of injustices. This includes internment camps during both world wars. Some of Canada’s camps were understandable. For example, several camps were set up to house enemy soldiers—mostly German—who were captured in Europe. In total, 34,000 were held in Canada for the duration of the war. Canada followed the rules of the Geneva Convention, standards in international law for how prisoners of war should be treated. The prisoners were returned to Germany at the war’s close. Perhaps reflecting the respectful treatment Canadians gave to the German prisoners, many former captives immigrated to Canada in the years that followed.

A more questionable internment that took place in Canada was the housing of 2,300 foreign-born Jewish men and boys. In the early days of World War II, there was panic in Britain about the political allegiance of some Jewish European refugees living there. Britain struck a secret agreement to deport several thousand to Canada. The idea was that they couldn’t undermine the war effort if they were interned so far away from the battlefield.
Fortunately, the people who ran Canada’s internment camps quickly realised these refugees were no danger. They were given considerable freedoms, such as being allowed to practice their religion, and setting up classes—often taught by visiting university professors—to help build a path for their integration into Canada. For the most part, these prisoners of war did not come to resent their experience. While their experience was far from ideal, many held some gratitude that the British and Canadians, by not deporting them to their countries of origin, saved them from the horrors of the Holocaust in Europe.

Canada also used internment camps to hold its own citizens. These camps raise many concerns.

The federal government had sweeping powers under the War Measures Act, a law passed with the outbreak of World War I. The War Measures Act could be activated during wars, invasions, or insurrections. Under the law, the state could censor or ban publications, seize private property, take over transportation, trade and manufacturing sectors of the economy, and intern or deport people for most any reason.

During World War II, a handful of communists and fascists found themselves interned. This includes Montreal’s fascist-sympathising mayor, who was also outspoken in his opposition to conscripting soldiers to join the battle.

Italian and German Canadians were not treated especially well under this law during the war. Thousands had to register with the government, for fears they would be conspiring with the enemy. About 850 Canadians of German descent and 500 Canadians of Italian descent were interned. In addition, Canada interned another 100 Italian sailors who by circumstance found themselves here when Italy declared war. While some believe that the government had reason to be concerned—at least 100 of the internees were card-carrying members of the Italian Fascist Party—none of the people interned were ever charged with a crime. This brings into question what right Canada had to suspend their civil liberties. In 2021, the federal government issued a formal apology for its actions against Italian Canadians during the war.

More shameful was our internment of over 20,000 Canadians of Japanese descent. Japanese people living near the British Columbia coast were rounded up, and their possessions were confiscated. Most were placed in ghost-towns-turned-camps in the Kootenay Mountains. Others were put to work on prairie sugar beet plantations.

Following the war, they were released and encouraged to move to Japan. 4,000 were involuntarily deported. Not one of these people was ever charged with a crime against Canada. Following years of demands, in 1988 the government issued a formal apology. Those interned were provided reparation payments for their property that was taken and never returned.

The Arc of Progress

Canada behaved more responsibly with World War II internments than many other countries. The camps more closely resembled Oran’s fictional camp than, say, the Vél d’Hiv. Nonetheless, especially as the Japanese experience reminds us, Canada was far from perfect.
Recognising that the War Measures Act was an overreach of state power, and allowed for the creation of such camps, in 1988 it was replaced by the Emergency Act. The new law rolled back many of the War Measures Act’s draconian powers. This reflects how, as our values evolve, so do our laws. Just as Martin Luther King Jr said, “The arc of the moral universe is long, but it bends toward justice.”

That said, the moral universe will only continue bending towards justice if we learn from the mistakes of the past, and demand changes accordingly.

**Discuss**

1. In *The Plague*, *Y. pestis* is broadly meant to be an allegory for Nazis and their sympathisers. Oran’s internment camp houses people suspected of being infected with *Y. pestis*.
   a) In what ways does Oran’s internment camp resemble and differ from camps in Vichy France?
   b) In what ways does it resemble and differ from camps in Canada?

   You may wish to look more deeply into France and Canada’s World War II internment camps to answer these questions.

2. Camus’ depiction of Oran’s isolation camp reflects much about the life of a camp prisoner. But it does not reflect the worst of Vichy France’s internment camps. Why would this be?

3. Why should we be careful to understand the limits of an allegory?

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Pandemics have curious ways of reminding us that while we are progressing as a society, some injustices still remain. Consider some of the injustices that prisoners face in *The Plague*. Recall that in Part Three Chapter 1, we learn how the disease is especially deadly for people in prison, partly because prison conditions make it impossible to socially distance. And in Part Four Chapter 5, Tarrou writes that for the people interned in Oran’s quarantine camps, “worst of all... is that they’re forgotten, and they know it” (197).

Advocates of prisoner rights have shown how similar conditions exist for many incarcerated people today. When COVID-19 worked its way into prisons, it proved exceptionally contagious. Fortunately, through the work of journalists and prisoner rights advocates, some attention has been given to these conditions. However, awareness is only one step. The federal and provincial governments have not yet undertaken comprehensive prison condition reforms.

**COVID-19 in Saskatchewan prisons**

When the COVID-19 pandemic set in, the justice system took steps to lower the prison population. As legal scholar John Fabian Witt points out, “not one person in the prison system had been sentenced to be involuntarily exposed to a potentially deadly infectious disease.” It would be inhumane and unjust to knowingly put people at a heightened risk of catching COVID-19.

Lowering the prison population is a complex task. People cannot simply be released from prison on a whim. Instead, the justice system used tools at its disposal to lower prison populations. When the pandemic set in, steps to lower the prison population included:

- Remand was used less often. Instead, some people awaiting trial were allowed to remain in their community, often with conditions on their freedom attached.
- Sentencing became more creative. For example, some people found guilty of less serious crimes were able to serve their sentences at home.
- The Federal Minister of Public Safety encouraged Correctional Services Canada and the Parole Board of Canada to consider early release for low-risk offenders.

Broadly, these moves worked to lower prison populations. In Saskatchewan, prison populations were below long-term averages for most of 2020.
While these measures reduced prison populations, they could not stop COVID-19 from making its way into prisons. Once inside, the disease quickly spread.

For example, on December 12th, 2020, a COVID-19 outbreak was declared at Saskatchewan Penitentiary, a federal prison in Prince Albert. By January 12th, a total of 244 cases had been recorded in the facility, and one prisoner died. Given that the prison has a maximum capacity of just under 600 people, this is an astonishingly high infection rate.

The spread of COVID-19 in prisons can be partly understood as a consequence of the inability for prisoners to maintain safe distances apart. There is simply not much personal space in prisons, and not enough room to separate everyone who is infected from everyone who is not. Prisoner advocate Sherri Maier told the CBC that in Saskatchewan’s provincial prisons, healthy inmates were being housed in units where other inmates had COVID-19.

Social distancing was only one of several challenges that prisoners faced. Maier also worried about access to soap and hot water in Saskatchewan’s provincial prisons. In a letter to Saskatchewan’s Office of the Correctional Investigator, she pointed out that “Their washrooms have no hand soap and there is hardly any hot water.”

The availability of masks was also a problem. In November 2020, the CBC reported that the Regina Correctional Centre was only supplying masks for staff. As an inmate said:

> There’s boxes of [masks] in the office for the staff members. Quite a few people have attempted to say, ‘Can I have one of those?’ And the answer is always, ‘No, you’re not allowed those.’

One inmate was given a mask by a kitchen staff member, only to have it taken away by a corrections officer.

Policies were put in place to reduce social contact between prisoners. This led to social distancing but also created extreme isolation. Prisoners often received only 30 minutes outside, every second day. This added to the mental stress of inmates. Pierre Hawkins, a lawyer for the prisoner rights organisation The John Howard Society of Saskatchewan, remarked that

> We have a population here that disproportionately suffers, not only from mental health issues, but also from a physical vulnerability to complications from the virus. So you can understand why, that while on lock down with very few things to do, that people just sort of sit and worry and tensions, understandably, build a little bit.

The prisoners were not the only ones feeling the tension. James Bloomfield, the prairie region president for the Union of Canadian Correctional Officers, said that

> As more [COVID-19] cases come in, the more mental strain that is on that staff on top of all the normality that goes with their job, which is a wild environment to say the least.
Because the people who work in prisons are also in the community, out-of-control disease outbreaks in prison can easily spread back into the community. One study by the Prison Policy Initiative found that COVID-19 outbreaks in prisons were correlated with subsequent community outbreaks. Prison walls are no barrier to COVID-19.

Representatives from both federal and provincial jails have said they have adapted measures to keep prisoners safe. The deputy warden of the Saskatchewan Penitentiary told the CBC that

> There are a variety of safety protocols in place [from] intensive screening at the front of the institution when people are entering it, from temperature checks to proper PPE, there’s significant cleaning.7

As well, a spokesperson for the provincial government noted that the measures being taken to keep prisons as safe as possible have “evolved”8. Nonetheless, prisoners and their advocates insist that much more must be done.

**Justice and Well-Being**

For some people, it is easy to think that people in prison need not be treated well because they committed a crime. However, the people who go into a prison will one day be reintegrated into the community. This means that the long-term well-being of a community and a society depends upon prison being a place of rehabilitation, not just a place of punishment. This is a reason why Saskatchewan’s provincial jails are called “correctional” centres, not “punishment” centres.

That said, there is only so much that courts and prison administrators can do about prison conditions. Courts sentence people in accordance with the laws created by governments. Prisons carry out their responsibilities with the resources given to them by governments.

Put another way, just as prisoner advocate Cory Cardinal reminded us, prison conditions are a consequence of political choices: we elect governments, and they create our justice system. Substantial changes to prison conditions can only happen if enough citizens demand that governments make changes.

**Discuss**

1. An open letter about prison conditions and COVID-19 was written to Saskatchewan’s Minister of Corrections and Public Safety. Signed by hundreds, it read in part:

> This lack of action and responsibility bespeaks a situation of unconscionable indifference to the health and well-being of people in custody.9

Do you agree with this statement? If so, what can be done?

2. Some people have suggested that prisoners should be at the “back of the line” for COVID-19 vaccinations. Is this justice?
3. Look back to your conception of justice, from the handout *Justice, Not Hatred*.

   a) Is your conception of justice compatible with prison conditions?

   b) What ways could you help create change in the correctional system?

To help answer these questions, check out other articles on the state of Canada’s prisons.

**Good starting points include:**

- the *Maclean’s* article “Houses of hate: How Canada’s prison system is broken.” Find it at www.macleans.ca/news/canada/houses-of-hate-how-canadas-prison-system-is-broken/

- the John Howard Society of Saskatchewan’s podcast *Know Justice*. The podcast features inmate voices. Find it wherever you listen to podcasts.

- the CBC article “Prisoner advocate Cory Cardinal says much work to be done at Sask. jails.” Find it at www.cbc.ca/news/canada/saskatoon/cory-cardinal-released-1.5979764

As well, check out the references listed below.


Part Four • Chapter 6

Rieux and Tarrou visit an old asthma patient. He tells the story of how he once caught plague without realising it, reminding the men of how sneaky the disease can be.

1. Rieux’s old asthma patient remarks that people are getting fed up, and the situation could not go on forever.
   a) How does this statement apply to the plague?
   b) How does this statement apply to people under occupation or oppression?

2. The asthma patient says that “When I was young I lived with the idea of my innocence; that is to say, with no idea at all” (201). Is this a fair statement about youth?

3. The patient says that he sides with the victim, because to be a “true healer” (208) is difficult and rare.
   a) What is a “true healer”?
   b) Are there any “true healers” in The Plague? If not, why would Camus not include one?
   c) Are there any “true healers” in our society? If so, who are they? And how could we help create more of them?

4. What is the significance of the unexpected cold current that comes when Tarrou and Rieux swim in the ocean?
In *The Plague*, Tarrou says “my real interest in life was the death penalty” (204). The death penalty—sometimes called capital punishment—is when the state kills someone as punishment for a crime.

Tarrou’s interest in the death penalty began in his childhood. His father was a Director of Public Prosecutions, a lawyer responsible for prosecuting criminal offences. As a young boy, he watched the trial of a man accused of murder. During the court proceedings, his father—whom he viewed as a generally decent man—was “clamouring for the prisoner’s death” (203). Such harsh punishments, the boy was led to believe, were “inevitable for the building up of the new world in which murder would cease to be” (205).

Tarrou’s views on the death penalty changed when he watched a man being executed by firing squad. From that day on, he was unable to sleep well. The horrible event led him to reject sophisticated arguments for killing another person. In Tarrou’s words,

> if you gave in once, there was no reason for not continuing to give in. It seems to me that history has borne me out; today there’s a sort of competition who will kill the most. They’re all mad crazy over murder and they couldn’t stop killing men even if they wanted to. (206)

His life experiences with the death penalty—from seeing his father clamour for the death of another person to witnessing an execution first-hand—made him realise that the killing had to stop. He no longer could believe in any justification for the death penalty.

Tarrou had much in common with Albert Camus. Camus spent much of his adult life opposing the death penalty. This opposition appeared in his works of fiction and non-fiction. In addition to Tarrou’s story in *The Plague*, Camus’ breakthrough novel *The Stranger* raises questions about the death penalty. More pointedly, in 1957 he wrote the essay “Reflections on the Guillotine,” a passionate and well-researched argument for ending the death penalty.

Camus’ opposition to the death penalty began early in his life. As a young boy in Algeria, Camus learned a story about his deceased father Lucien. Lucien left early one morning to watch a public execution by guillotine. The execution, the elder Camus believed, was justified, for the condemned man had brutally murdered an entire family. Nonetheless, Lucien was sickened by what he saw. He returned home, laid down, and threw up.

This story of his father sickened by the death penalty founded Camus’ basis for opposing it. However, there was a brief time, at the close of the war, when his opposition to the death penalty wavered.
France 1944: From Wild Purge to Legal Purge

The Nazis were pushed out of France during the summer of 1944. As Nazi authority collapsed, the country was briefly left without its own government and justice system. Charles de Gaulle’s Free French government did not begin to establish its authority until late August. In the days between Nazi authority and Free French Authority, the épuration sauvage (Wild Purge) unfolded.

The Wild Purge was a time of no French government or French law to deal with the country’s Nazi collaborators. While Allied occupying armies were technically in control, in the absence of organised justice, mob chaos often ensued. French women who had relationships with German soldiers had their heads shaven and were publicly marched in the streets. Suspected Vichy collaborators were rounded up by the French Forces of the Interior and herded into prison camps, including locations like the notorious Vél d’Hiv. Sometimes, angry mobs simply killed people. In total, an estimated 1,600 people lost their lives in the Wild Purge. While some of the victims were amongst France’s most odious Nazi collaborators, the fact remains that what unfolded was revenge. There were no courts and no due process to hear out the accused.

By September, de Gaulle began instituting court processes to tame the mob justice. This began a new era, known as the épuration légale (Legal Purge). The Legal Purge was France’s way of dealing with its citizen-collaborators. By 1951, some 300,000 people were charged with crimes. About 50,000 received sentences of ‘national degradation.’ 6,763 people were sentenced to death. Only 791 of these death sentences were carried out. Marshal Pétain was one of the Vichy leaders sentenced to death, but his sentence was commuted.

Camus Wavers

As France was returned to French hands, Camus believed that mercy should not be given to Nazi collaborators. Their horrible crimes justified their punishments and executions. On October 20th, 1944, he made this argument in the pages of Combat, the Resistance newspaper he edited from 1943 – 1947. While he denounced random executions on the streets, he spoke in favour of Legal Purge executions:

'It is our conviction that there are times when we must silence our feelings and renounce our peace of mind. Ours is such a time, and its terrible law, with which it is futile to argue, forces us to destroy a living part of our country in order that we may save its very soul.'

This acceptance of death as punishment was a marked change in Camus’ lifelong belief about the death penalty.

Other public figures in France, including famed French writer and Resistance member François Mauriac, believed that many of Vichy’s collaborators should be shown some mercy. Mauriac worried that liberated France, in its eagerness to execute its enemies, was becoming what it had set out to defeat. He wrote

'We aspire to be something better than a nation trading off the roles of executioner and victim. At no price must the Fourth Republic wear the Gestapo’s boots.'
Mauriac was not defending the collaborator’s past actions. Rather, he was saying that for France to heal, the cycle of death had to stop.

Camus and Mauriac sparred back and forth on the issue until January 1945. In a Combat editorial “The Purge has Gone Too Far,” Camus lamented the excesses of revenge unfolding in France. He did not renounce his earlier belief that some people deserved execution for their crimes during the war. However, he now believed that justice was belated, and its implementation was inconsistent. It was time to move on from executions.

At this juncture in his life, Camus was becoming mentally and physically exhausted. He took a brief leave of absence from Combat, and began to shift away from writing explicitly political thought pieces as he came to understand that we cannot let politics consume every aspect of our lives. Though he considered writing a book about collaborators and the death penalty, he instead pivoted back to finishing The Plague.

Does the Death Penalty Work?

Moral arguments aside, opponents of the death penalty point out that it has several practical flaws. Research shows that the death penalty does not work as a deterrent: it does very little—if anything—to reduce murder rates. More disturbingly, in several American cases where a person was sentenced to death, evidence emerged that proved the person innocent, after they were executed.
Discuss

1. Reconsider Tarrou’s statement about the need for the death penalty, in light of the complexities facing France following World War II.

   But I was told that these few deaths were inevitable for the building up of a new world in which murder would cease to be. That was also true up to a point – and maybe I’m not capable of standing fast where that order of truths is concerned. (205)

   How does this reflect Camus’ changing beliefs about the death penalty in post-Vichy France?

2. Look back at the beginning of Part Two Chapter 8. Think about this passage, especially the boldfaced part:

   On the whole, men are more good than bad; that, however, isn’t the real point. But they are more or less ignorant, and it is this that we call vice or virtue; the most incorrigible vice being that of an ignorance which fancies it knows everything and therefore claims for itself the right to kill. The soul of the murderer is blind; and there can be no true goodness nor true love without the utmost clear-sightedness. (110)

   Does anyone—including anyone in the criminal justice system—have the right to kill another person?

3. Reconsider François Mauriac’s statement about justice in post-Vichy France:

   We aspire to be something better than a nation trading off the roles of executioner and victim. At no price must the Fourth Republic wear the Gestapo’s boots.

   Do movements sometimes become what they set out to defeat?

4. Should justice be swift? Or should justice be slow and measured?

5. How can we best address injustices that happened in the not-recent past?

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Part Four • Chapter 7

Plague is mostly appearing in pneumonic form, but patients are eager to fight it off. Grand nearly succumbs to the disease, beginning a trend of quick recoveries.

1. Why does M. Othon decide to return to the isolation camp?
2. What is contained in Grand’s fifty pages of manuscript? What does this tell us about the need to not get too hung up on things?
3. Why would Grand ask that his manuscript be burned?

“always there comes an hour when one is weary of prisons, of one's work, and of devotion to duty, and all one craves for is a loved face, the warmth and wonder of a loving heart”

(207)
Part Four

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