In the history of Indian/White relations there is a tendency to view White domination as the inevitable result of military might, diplomatic prowess, and technological superiority. From the first invasion of the North American mainland by Ponce de Leon in 1513 to the "opening" of the Santa Fe Trail across the plains of future Kansas some three centuries later, the outcome never seemed in doubt. Judaic-Christian assumptions regarding the nature of human beings were matched by demonstrable means of physical domination and the ability to prevail at the treaty table, so that Indian people were cast in a wholly inferior status and viewed as mere pawns as the victor advanced and divided the spoils. For those Indians who survived, radical acculturation was the only sensible option.

But applied to the experience of the Kansa Indians (as one might do with scores of other tribes) such analysis ignores the essentials of historical demography, particularly the study of epidemic and pandemic disease. Such study presents a shockingly different panorama of the White invasion of the New World.

During the past two decades the traditional number of just over 1,000,000 aboriginal inhabitants in North America at the time of the Columbian invasion has been steadily and dramatically revised upward, so much so that today it is possible to post an estimated 18,000,000 Native Americans in the area north of Mexico at the time of first White contact. Most of the revision upward has resulted from the study of pathogens brought to the New World by Spanish, French, Dutch, and English nationals, and inadvertently planted among the ranks of a native population whose long-standing isolation—perhaps as long as 40,000 years—had provided them with virtually no immunity from the dreaded European germs.

By far the most lethal pathogen transported to America was smallpox. First introduced by Spanish sailors in 1516 on the island of Hispaniola, it quickly spread to Puerto Rico, Cuba, and other islands of the Caribbean. In 1520 Panfil de Narvaez took it to Mexico, from whence it spread rapidly to Chile and the interior of North America. Before this worst of all New World pandemics had run its course in 1524, approximately 13,500,000 Indians had lost their lives—roughly seventy-five percent of the New World population. Following smallpox in the order of numbers of fatalities caused were measles, influenza, bubonic plague, diphtheria, typhus, cholera, scarlet fever, whooping cough, malaria, and syphilis. Excluding the debatable origins of syphilis, all of these pathogens evolved in Europe, were transported to America, and collectively constitute the ultimate weapon in the conquest of the American Indian.
This certainly was the case with the Kansa Indians whose proximity to the Santa Fe Trail during the second quarter of the nineteenth century proved disastrous. While respiratory diseases accompanied by chronic malnutrition were a common affliction of the Kansa, and cholera took a heavy toll, smallpox was the most devastating. Of the near ninety-five percent reduction in Kansa population from the first official count by Pierre Lemoine Iberville in 1702 to the date of the final allotment count in 1902, smallpox probably accounted for more Kansa deaths than any other factor. The evidence points to a percentage close to the reduction percentage experienced hemispherically in the pandemic of 1520-1524. And, as will be seen, one epidemic alone during the Santa Fe Trail era, at a time when the tribe achieved some immunity from previous epidemics, took approximately a third of the remaining Kansa population to the grave.3

While some survivors of these grim reductions secured a degree of immunity from the next smallpox invasion, they nevertheless were physically weakened and thus more susceptible to non-smallpox pathogens. Swift and massive mortality observed by survivors prompted the severe damage of tribal mental health, making it difficult to engage in traditional subsistence activities or the fur trade that became increasingly important to Kansa survival by the second half of the eighteenth century.

Epidemics, in short, were catastrophic—far more catastrophic than military encounters with alien neighbors or the advancing Americans. Institutions and conventional understandings developed and refined over a period of centuries became meaningless almost overnight. Fundamental postulates of ethnic identity became blurred or totally obscure, and the consequent loss of what one scholar has called "core confidence" left the typical epidemic survivor extremely vulnerable to the invader. Certainly there is no better documentation for this than the report that the Kansas had "lost all confidence in each other following a particularly severe epidemic in 1855.4

We have no way of knowing whether the Kansas experienced the devastating pandemic of 1520-1524 other than circumstantial evidence and a mid-eighteenth century report that the Kansas had at one distant time been a "very numerous" people. Before the tribe migrated from the lower Mississippi valley to future northeastern Kansas sometime prior to 1724, Iberville's report to his French colonial superiors in New Orleans in 1702 listed 1,500 families. Based on an 1806 enumeration of individual family membership by Lieutenant Zebulon M. Pike the tribal total was approximately 4,800. Between Iberville's count and the next enumeration of "only two hundred fifty to three hundred [Kansa] men" by French Louisiana Governor Louis Bilbourat de Kerlorac in 1758, there were at least two major smallpox epidemics in North America; one in the years 1715-1721 that spread from the British tribes along the northeastern Atlantic coast to modern Texas, and another in 1750-1752 that raged from the Great Lakes region south to the lower Rio Grande.5

Whether the Kansas were afflicted on these occasions is unclear. More certain is the impact of the next and
certainly more fatal epidemic of 1755-1760. Ranging from central Mexico and the Pacific northwest to the eastern coast of North America, the epidemic was especially devastating in the Great Lakes region due to the high mobility of Indian people enmeshed in European fur trade politics and the alliances and counter-alliances accompanying the French and Indian War.6

Unlikely as it may seem, a substantial number of Kansa warriors were enlisted by the French to help defend Fort Duquesne from the British near modern Pittsburgh. But they arrived too late for the campaign against the British General Edward Braddock, and in the winter of 1755-1756 a few sick and struggling warriors made it back to the main Kansa villages just above the mouth of the Kansas river. With them they carried the deadly smallpox germs, and within the next two years some 3,300 Kansa had suffered a premature death. Some of these fatalities possibly came at the hands of the Pawnees, traditional enemies of the Kansa, who inhabited the area on the northwestern flank of the Kansa domain. Like other tribes in similar circumstances the irruption of epidemic disease generally prompted the Kansa to seek vengeance outside their own ranks and in this manner placate the Great Waconda for personal and social maladies they simply could not understand.7

Central to an understanding of Kansa historical demography from this point forward, and particularly the role the Santa Fe Trail and other highways across the plains played in future Kansa depopulation, is a conceptual error regarding acculturation of Indian people in general that for too long has dominated the thinking of historians, ethnologists, and anthropologists, not to mention the views of lay thinkers interested in the dynamics of Indian/White interactions. Collectively, we have fallen into the shoddy habit of assuming that Indians remained "aboriginal" or in a state of uncontaminated bliss until directly, and on an ongoing basis, faced with Spaniards, Frenchmen, Britons, or Americans alike. Then, and only then, could real trans-culturation have taken place in the orthodox "frontier" setting. But as research in other areas has shown, the particulars of the Kansa experience suggests otherwise.

By the time the young United States had purchased Louisiana from France in 1803 and the near 30,000,000 acres of the Kansa domain were susceptible to appropriation by land-hungry White Americans, the tribe had been reduced to approximately 1,500 persons. John Bradbury reported a total of 1,300 in 1801; Pike counted 1,465 in 1806, and George C. Sibley placed the number at 1,600 in 1816. The variance of the figures probably reflect the different times of the year the enumerations were made and periodic absences of Kansa hunting parties on the buffalo plains of western Kansas.8

Up to this point depopulation was principally the consequence of Kansa contact with other Native American groups to the east, that is, Indian people who had previously contracted the deadly pathogens accounting for the frightful mortality rates mentioned above. If, for lack of documentary evidence, we exclude the great pandemic of 1520-1524 and the two major
epidemics just prior to the French and Indian War, we must conclude that the journey of the Kansa warriors to the upper Ohio valley during this great inter-colonial war was, from a biological perspective, disastrous. The timing and route of this fateful journey necessitated no ongoing contact with White people. Indeed, all the evidence suggests that the smallpox germs that so decimated the Kansa between 1756 and 1758 came from contacts with the smallpox-afflicted Algonkin allies of the French in the Illinois and Ohio country.9

The opening of the Santa Fe Trail, as well as other international trade routes across Kansas, changed the situation dramatically. Now, for the first time, the Kansa would be subjected to close contacts with the invading Whites on their own domain, and on an almost continual basis. Coming as it did at the beginning of the third decade of the nineteenth century, the timing was especially well suited to new epidemic irruptions, since the survivors of the generation that had gained some immunity from the great epidemic of 1756-1758 were mostly gone and the next were vulnerable to a new invasion of the deadly pathogen. Cholera germs were also eagerly awaiting the demography of the next several decades.

Less than three years after William Becknell made his famous commercial journey from Franklin to Santa Fe, United States agents began the long process of divesting the Kansa of their land west of Missouri. On January 10, 1824, Fort Osage Factor George C. Sibley wrote a long letter to Missouri Senator David Barton, in which he extolled the virtues of western Missouri and eastern "Kansas." For the "savages" the land was worthless from an economic point of view, but in the hands of "enterprising White settlers" its rich and exuberant soil would yield a copious overflow of valuable commodities. Without secure title to the land already in the hands of squatters, these advance agents of civilization would surely "contract habits of violence and a sort of semi-savage barbarism of manners" not unlike that of the natives they surely must displace.10

Money and other forms of economic assistance which the Kansa desperately needed were the carrot. With the fur trade on the decline Sibley convinced certain Kansa leaders that their only alternative was to sign a major land cession treaty providing the assistance so crucial to their survival.

Meeting with Sibley and St. Louis Indian Superintendent William Clark in early June, 1825, the Kansa leadership agreed to relinquish ownership of all their land in Missouri, as well as a massive cession in future Kansas,

beginning at the entrance of the Kansas river into the Missouri river; from thence North to the North-West corner of the State of Missouri; from thence Westwardly to the Nodewa river, thirty miles from its entrance to the Big Nemahaw river into the Missouri, and with that river to its source; from thence to the source of the Kansas river, leaving the old village of the Pani Republic to the West, from hence, on the ridge dividing the waters of the Kansas river from those of the Arkansas, to the
Western boundary of the State line of Missouri, and with that line, thirty miles, to the place of beginning. For this massive cession, involving roughly forty percent of modern Kansas, the Kansas were promised a $3,500 annuity for twenty years and a diminished reservation thirty miles wide, beginning twenty leagues west of the mouth of the Kansas river (just west of modern Topeka) and extending west to a vague point near the western boundary of present Kansas. Agricultural assistance and educational facilities for tribal children were promised, but nothing was said regarding the vaccination of the Kansas against smallpox.

Article Eleven of the treaty provided that the United States should forever enjoy navigation rights on the diminished Kansas reservation, but nothing was said about the authority to travel overland. This was indeed a glaring oversight, especially at a time when the value of the Santa Fe trade was increasing sharply. Consequently, a law signed by President James Monroe in 1825 provided for an official survey of the Trail, and the establishment of cordial relationships with the several tribes claiming occupancy rights along the route. Shortly thereafter, on August 16, 1825, Sibley, Benjamin Reeves, and Thomas Mathers met a handful of Kansas leaders at the Sora Creek crossing of the Santa Fe Trail (the Dry Turkey crossing in present McPherson County), about 200 miles west of modern Kansas City. Here it was agreed to allow the survey team to continue their work unmolested, and for the pitifully small sum of $800--paid directly to tribal leaders in the area at that time--the trail was to be "forever free for the use of the citizens of the United States and of the Mexican Republic."

From the start the Kansas were involved with traders plying the Santa Fe Trail. Becknell, on his return trip from Santa Fe in early January, 1822, bought corn from the tribe at their Blue Earth village near modern Manhattan, and from then until the Civil War years the Kansas either traded or begged (more often the latter) from the Trail trains as they moved south of the Mission Creek villages west of present Topeka where the tribe was relocated following the Treaty of 1825. Trail merchants were a major source for the illicit alcohol that so demoralized the Kansas, and they too brought the deadly germs accounting for future irruptions of contagious diseases.

Indeed, by the late 1820s epidemics had become a way of life for the unfortunate Kansas. In September, 1827, while congregated on the Trail near Westport to collect their annuities under the Treaty of 1825, scores of Kansas became sick and died within a very short time. Indian Agent John Dougherty put the number of deaths at seventy; Superintendent Clark in St. Louis reported the number at 180. All the evidence suggests that smallpox was the malady. No less than two-thirds of the tribe were afflicted and so weakened were they that they were unable to make the semi-annual buffalo hunt that fall. While the disease spread to the Osages to the south, destitute conditions prevailed during the winter season. Six years later cholera struck with force and while
the mortality rate was not recorded it must have been signifi-
cant, since it was reported that there were "but two at the
[Kansa] Agency who was not down with the fever." And in the
summer of 1839 what was described as a raging fever struck
the Kansas—either cholera or smallpox but more likely the
latter. In a short time another one-hundred Kansa lay dead
on the prairie. Reported Missionary William Johnson, whose
Methodist Episcopal Church had been awarded a government
contract to "civilize" the Kansas, "but few families escaped
the disease and the number of deaths was great in proportion
to the number of the sick. The awful cries of the Indians
around the dead sounded in our ears nearly every day." 15

Between 1829 and 1845 the government could provide funds
for at least six official military escorts on the Santa Fe
Trail but somehow was unable to provide proper preventative
medical attention for the repeatedly stricken Kansa. Vaccina-
tion, a significant improvement over variolation as a
preventative to smallpox, was announced by Dr. Edward Jenner
in 1797. President Jefferson urged its widespread use to an
Indian delegation visiting Washington in 1801, and federal
laws were passed to make vaccine available to White Americans
at a nominal price. But bureaucratic bickering between
private traders who wanted the Kansa to sustain their hunting
economy and government agents given the responsibility to
look after the Kansa's welfare prevented the tribe from being
vaccinated until 1838, when Dr. A. Chute submitted for
payment a vaccination register of 195 Kansa. Whether in
fact Chute vaccinated the Kansa remains doubtful, or if he
did the vaccine may have been contaminated. As stated, the
1839 epidemic very likely was smallpox, and there is no ques-
tion whatsoever that an even more devastating epidemic some
fifteen years later was the dreaded disease. Moving into
mid-century the Kansa were as susceptible as they had been a
century earlier, when they contracted it during the French
and Indian War. And their physical condition was further
weakened by "terrible destitution" and malnutrition commonly
reported in the decade of the 1840s.16

Demographically, the worst was yet to come, and in this
the Santa Fe Trail commerce played a dramatic role. With
unpaid Kansa traders' debts accumulating sharply and the need
to make available more land for the emigrant tribes from the
East, coupled with an unwavering insistence that the Kansa
become dirt farmers, government agents negotiated a massive
land cession treaty with the Kansa in 1846. The arrangement
placed the Kansa on a 250,000 acre concentrated reservation
at Council Grove on the upper Neohou—at the very doorstep to
the Santa Fe Trail. Here, under the presumed watchful eyes
of Indian agents and church officials, their quality of life
was supposed to improve. Promoters of the Council Grove
townsite were elated and there even was talk of allotting
the new reservation and selling part of it to non-Indian settlers
in and around this important station on the Santa Fe Trail.17

Talk of this sort became more serious with the opening
of Kansas Territory in May, 1854 and the flood of white
speculators who overran many Indian reserves with impunity.
Even the first Territorial Governor, Andrew H. Reeder, became
involved in a Kansa land speculation that eventually would
cost him his job. It was, in short, a time of excitement for nearly everyone but Indians.\(^{18}\)

Silently and deadly the march of epidemic disease continued, this time directly from the Southwest. Less than two years before Alexander Majors and William H. Russell signed a government contract, on April 28, 1854, to haul army supplies over the Santa Fe Trail between Fort Leavenworth and Albuquerque, a disastrous smallpox epidemic erupted in the Pacific Northwest and then in the Pueblo country of modern New Mexico. James A. Little, a Majors and Russell employee from Indians, later recalled that the train consisted of forty large prairie schooners, each being as large as four ordinary wagons and carrying a load averaging three tons. More than 500 oxen and "a lot of extras for recruit" were required for the shipment comprised mainly of sugar, coffee, bacon, and spices.\(^{19}\)

It was a profitable undertaking, but on the return trip in the spring of 1855 severe medical problems were encountered. An outbreak of cholera that had hit large Mormon camps at Independence and Westport the previous spring had spread westward so that Majors and Russell were forced to abandon two entire trains (possibly returning from Fort Laramie) in the vicinity of Fort Riley. To the southwest, on the Santa Fe Trail, the situation was worse—certainly for the Kansa Indians.\(^{20}\)

Smallpox pathogens apparently contracted from the Pueblos moved northeast with the returning Majors and Russell train from Albuquerque. Little, who had not been vaccinated, feared for his life and left the train at Council Grove, where he stayed with trader Seth Hays until he could join Armijo's Mexican freighting firm bound for Kansas City later in the season. But the Kansas were less fortunate. Weakened by cholera and malnutrition since the early spring of 1855, their ranks were attacked by smallpox germs with a vengeance, and before the end of summer more than 400 had died—nearly one-third of their total population. Clearly, it was the worst medical disaster since the French and Indian War. Incredible as it may seem, Kansa Indian Agent John Montgomery's report to his superiors in Washington was "that smallpox has continued fatally with a greater number of them, it seems, to the great satisfaction and admiration of those who have any acquaintance with [them].\(^{21}\)

Until forcibly removed to the Indian Territory in 1873 the Kansa tribe never recovered from the epidemic of 1855. While railroad corporations, land speculators, and White squatters planned, with the help of the government, the final disposals of the Kansa reservation near Council Grove, reports of high mortality became commonplace. In October, 1859, for example, the official Kansa agent reported that more than 200 Indians had died prematurely during the past twenty-four months. Smugly, and with obvious contempt for human suffering, a local newspaper editor predicted "that at this rate five years will solve the [Kansa] question." By 1861 the year of Kansas statehood, the number was down another 225 individuals to a total of 802, and by the time of removal twelve years later, only 700 Kansas remained. Even following removal the
tragic trend continued. By 1877 the number was down to 425 and by the time the final allotment rolls were closed in 1902, only 249 Kansa could be counted.22

It would be wrong to attribute this dramatic depopulation to the Santa Fe Trail per se. Government ineptitude, particularly in the areas of treaty enforcement and the providing of essential nourishment and scientifically demonstrated methods of preventative medicine, loomed large, as did the land-grabbing tactics of White settlers who invaded the Upper Neosho valley reservation with little concern for tribal welfare. But as a specific vehicle for the more efficient movement of epidemic disease to decimate the Kansa population, the Santa Fe Trail traders must share a large part of the responsibility.

NOTES


2. Dobyns, Their Number Become Thinned, 11-24.


4. John Montgomery to Alexander Cumming, 31 August 1855, Office of Indian Affairs, Letters Received RG 75, M 234, Kansas Agency R 364, National Archives.


6. Dobyns, Their Number Become Thinned, Table 1, 15.


10. George C. Sibley to David Barron, 10 January 1824, George C. Sibley Papers, Manuscript Division, Missouri Historical Society.


12. Ibid., 222-25.

13. Ibid., 248-50.

15. Ibid., 146; Unrau, "Depopulation of the Dheghla-Siouan Kansaas," 318; William Johnson to Corresponding Secretary of the Missionary Society of the Methodist Episcopal Church, 30 December 1840, George Pearson Morehouse Papers, Manuscript Division, Kansas State Historical Society.


19. Dobyns, Their Number Become Thinned, Table 1, 16; Barry, Beginning of the West, 1206-07.

20. Alexander Majors, Seventy Years on the Frontier (Minneapolis: Ross and Nasmyth, 1965), 141.
