

OPINION

The Story of the Victorian-Era Anti-Jab Movement



“Death the Vaccinator,” published by the London Society for the Abolition of Compulsory Vaccination in the late 1800s. The Historical Medical Library of The College of Physicians of Philadelphia, Public Domain



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Commentary

The epithet of “anti-vaxxer” is common in our time for anyone who resists mandates or resents the enormous legal privileges, protections, patents, and subsidies the industry receives today. It also pertains to those who attempt to bring attention to vaccine injury and death, a sensitive and even suppressed subject for an industry that relies on a utilitarian measure to demonstrate its social value.

The label does not always or often make sense. The dominant theme of the movement now—and this has always been true—is to reject intervention and instead regard this industry as any other in a free marketplace (hamburgers, bottled water, washing machines, etc.), neither subsidized, nor mandated, nor protected from liability from imposed harms. If that goal were achieved, the “anti-vaxx” movement would shrink dramatically.

The trouble is that no matter how deep we look into the history of vaccination in Western countries, and the United States in particular, we find that vaccination has never been treated as a normal market good to accept or reject based on consumer preference.

Indeed, if this pharmaceutical product were as obviously glorious as advertised, it should be able to elicit sufficient economic demand to sustain itself profitably and competitively like any other product. It's simple: let this industry be subjected to the cold winds of a ruthless free market and see what happens.

From the outset, however, the vaccine industry has enjoyed some form of privilege under the law. I've detailed some of this [history here](#).

This naturally gives rise to suspicions that something isn't quite right. Perhaps these products are neither safe nor effective, else why would the population need such heavy-handed nudging? Injury from shots further fuels the fervor to at least make them voluntary and stop the subsidies and liability protections. What's more, mandates have historically not led to higher vaccination rates but only more population resistance and lower rates.

An excellent example is the Leicester Anti-Vaccination League of the 1870s and 1880s England. This was one of the more effective anti-vaccine mandate movements in Western history. It rose up in response to the Vaccination Act of 1867 as passed by Parliament in compliance with intense industry lobbying and the familiar graft (nothing has changed).

This Act made vaccination mandatory for all children up to the age of 14. It paid vaccinators 1 and 3 shillings per successful vaccination (same as now). It required birth registrars to issue a notice of vaccination within seven days of a child's birth registration (same). Non-compliance led to criminal conviction and a fine of up to 20 shillings (millions were professionally displaced only recently with the COVID shot). The Act imposed repeated penalties until the child was vaccinated (same: doctors lost licenses). Failure to pay could result in imprisonment (some went to jail this time). It also banned

variolation (the older method of exposure triggering an immune response) with imprisonment up to one month.

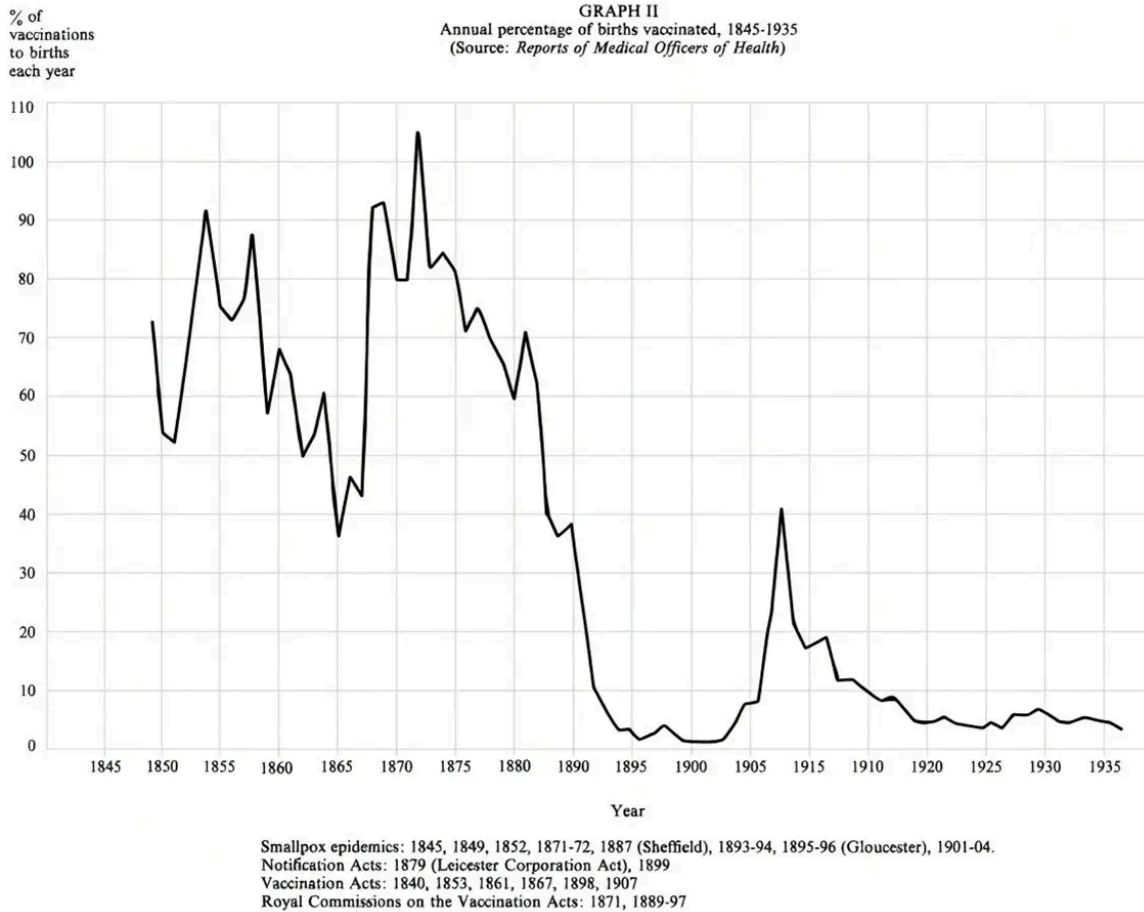
A question I keep asking myself about this period: if vaccination is so much and obviously superior to variolation, why was such hoopla and subsidies necessary for one to replace the other, all the way up to criminal penalties for using the older method? I do not have the answer, except to say this is another way in which this industry defies market dynamics in which innovations always organically replace inferior tech.

In short, the Vaccination Act of 1867 was an egregious law, passed in the face of growing population resistance that developed in the half-century since the famed Edward Jenner first brought the attention to the new method to replace variolation. While effectiveness of the cross immunity from cowpox to smallpox was never in question, injury from vaccination (via cuts in the arm, sniffed through the nose, and only later injected) had been a theme from the 1790s.

The Leicester Anti-Vaccination League was founded in 1869 in response to the government's crackdown. At its height, it had 100,000 members. Their theme was consistent: good hygiene and good sanitation are enough to satisfy the demands of public health. The League believed that vaccines were wildly overrated relative to traditional public health measures. This was considered to be a reactionary movement.

Prosecutions in Leicester for non-vaccination went from 2 in 1869 to 1,154 in 1881, and more than 3,000 by 1884. Hundreds faced fines or imprisonment; some parents chose jail as a deliberate protest. This Ghandi-like movement has never been celebrated as such but instead has been treated as an irrational anti-science populist revolt of know-nothings.

Even in those days, the movement had to resist media smears. Because of what might today be regarded as "misinformation," vaccination uptake plummeted in light of the coercion, from 90 percent at its height in 1870 to a mere 1 percent by 1890. The graph below comes from the *Journal of Medical History*, "[Leicester and Smallpox: The Leicester Method](#)" by Stuart M.F. Fraser. It was neither the first nor the last time a mandate caused opposite results of those intended.



The movement grew despite extreme methods and oppression, due to the persistence of vaccine injury and a growing sense that shots were not as effective in cleaning up the commons as clean water, food, and hygiene. Because industry profits are more voluminous from vaccination than sanitation and hand washing, vaccination was treated by official sources as some kind of magic bullet. Therefore low uptake was seen as foreshadowing a public health disaster.

To the amazement of many, smallpox cases actually declined during the period of high resistance to vaccination, much more so than in other cities. As Fraser writes, with some reluctance, “Leicester stands as an example, probably the first, where measures other than total reliance on vaccination were introduced successfully to eradicate the disease from a community.”

Sanitation engineer and town council member J.T. Biggs in 1912 published a retrospective 800-page book (“[Leicester: Sanitation versus Vaccination](#)”) seeking to demonstrate a simple but indisputable point: “Leicester not only has less small-pox than any other town of a similar character, but also very little vaccination.”

Emboldened by the empirical results of the mandate refuseniks, the movement kept growing. The most famous event was the Leicester

Demonstration March on March 23, 1885. Up to 80,000–100,000 participants, drawing delegates from over 50 other anti-vaccination groups, protested in the streets in response to mandates.

The procession featured banners with slogans emphasizing liberty, men who had been imprisoned for refusing vaccination, families whose goods had been seized for unpaid fines, a child's coffin symbolizing vaccine deaths, which were undeniably real. This movement spread to every city.

So powerful was this movement that Parliament decided on its own to convene a Royal Commission to investigate vaccines in general, which met from 1889-1896. It affirmed vaccination's value but recommended ending penalties for non-compliance and introducing a "conscientious objection" clause. These points were enacted in the Vaccination Act of 1898.

This Act did not satisfy any side in the debate. The industry demanded mandates, as it always has and does, while the anti-mandate side only grew. The Leicester League became the National Anti-Vaccination League that continued its efforts, eventually resulting in a complete repeal of mandates in the United Kingdom in 1948.

The industry in Britain pushed to impose vaccine mandates in the case of COVID—particularly on health care workers—but those were struck down by courts. As a result, and mostly due to this long history, mandates were far less intense than in the United States or most of Europe.

The shoddy performance of the COVID shot, however, has given rise to more population resistance to vaccination in general but it is nothing like what happened in the Victorian era, when a mass movement mobilized and successfully beat back a wicked and industry-backed coercive regime of mandatory inoculation.

All rhetoric, hyperbole, and seeming extremism aside, all these movements have ever really wanted—from the 1790s to today—is for this product to be subject to normal market discipline of supply and demand, without any interventions designed to back the industry. If vaccination provides both individual and community benefit, it can and should survive on its own.

This should not be too much to ask. Sadly for this industry and the public, it has long benefited from its close relationship to government while relying on utilitarian ethics to sweep risks and injuries under the rug. So long as that

is true, population resistance will flare in every instance of vaccine mandates and obvious (if suppressed) evidence of mass vaccine injury.



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