

BC HISTORY OF NURSING



## FROM THE PRESIDENT'S PEN

*By Lois Blair*

Two items of interest for the BC History of Nursing Group are our new website and the ongoing discussions concerning the future of the Professional Practice Groups (PPG's). First I commend the ad hoc committee members for the comprehensive work they did exploring and investigating the issues involved with the detachment of the PPG's from the College of Registered Nurses of BC (CRNBC). Sandra Broad, Isobel MacDonald, Genelle Liefso and Geertje Boshma, all members of our BC History of Nursing PPG, compiled information about the issues and the progress of the other PPG's. I attended the PPG Council meeting in February and found other PPG's are similarly unclear and confused as to the present mandate of the CRNBC. Some PPG's have folded, others were only beginning to explore the options while a couple have gone on to establish associations under the Society Act. It is too lengthy to list all the options in this report but the main issue is whether the BC History of Nursing PPG can remain under the umbrella of the CRNBC given the current mandate of CRNBC. The ad hoc committee members explored the possibility of being under the Canadian Association for the History of Nursing (CAHN) or possibly the Canadian Nurses Association (CNA). At this point neither option is feasible and we are looking toward either being under the Society Act or remain with the CRNBC. There will be a special meeting of the PPG Council to provide further discussion on these points and a letter was sent to the President of the CRNBC requesting further clarification and requesting her attendance at the meeting.

At our February Executive meeting Fahim Dhalla, our new webmaster from Biz ala Carte, presented plans for revision of our website. Working with the Web Committee the following will occur: web mock-up and design, content written and integrated, data base developed and integrated, and finally site testing. The plan is for the new site to "Go Live" by June 2008.

Keeping the updating process simple will enable members on our various committees to access appropriate web pages and edit and remove data on an individual basis. Three sample cover pages were presented and soon a choice will be made. Biz ala Carte assures us that a backup of the web site is secure with placement of our data in a secure location. So the nursing treasures compiled in our database are fully protected. The next step is back to the Web Committee and to keep proposed timelines for an end of June start up. Stay posted as we look forward to a whole new look for the History of Nursing Group.

## FROM THE EDITOR'S PEN

If you are sitting at your computer and reading this issue it likely means that you have renewed your membership for 2008 and decided to receive the History of Nursing News in PDF format. If your mailed newsletter contains a white application form, we either haven't heard from you yet or your membership renewal is in the mail. Whatever the case, we need and value your support.

Look inside this issue for details about the History of Nursing Group's Annual General Meeting on April 17, 2008. Last year's dinner meeting format was a huge success. Please join us and give us your input as we plan for the future. And you won't want to miss our annual spring High Tea at Hycroft on May 9, 2008 featuring a fashion show by costume historian Ivan Sayers.

This issue is chock full of interesting articles and book reviews. So brew up a cup of tea, put on your reading glasses and enjoy!

*Beth Fitzpatrick, Editor*

## GET OUT YOUR DATEBOOKS!

**BC Historical Federation** annual meeting and conference (BC History of Nursing Group is an associate member) will be held in New Westminster, **May 8-11, 2008**. A varied program for the Conference, beginning with workshops on Land Titles Research and Non Profits financial planning, insurance and reporting, have been arranged. Take a guided tour of Fort Langley historic site and visit other museums in the area or shop in the many interesting stores in the Village. Enjoy high tea at St. George's Anglican Church. Visit the Museum of the Royal Westminster Regiment after enjoying lunch at Galbraith House, a restored Victorian mansion. There is much more; for further information visit [bchistory.ca/conference/2008/](http://bchistory.ca/conference/2008/).

**Sisters of St. Ann**, through the Friends of St. Ann's Academy, celebrate the 150th anniversary of the arrival of the Sisters of St. Ann in Victoria, **June 5-8, 2008**, and the establishment of St. Ann's Academy. Although the four Sisters originally came as teachers, they also brought the nursing care to Victoria.

- Thursday June 5th at 3pm: *Historical Re-enactment* starts from the Inner Harbour to the Pioneer Schoolhouse and on to St. Ann's for the opening Prayer and Informal reception.
- Friday June 6 10am-4pm *Guided Tours* of St. Ann's Academy and *Historical Walking Tours* of the neighbourhood. 7PM *Concert* on the Grounds with the Victoria Symphony Orchestra (free, rain or shine)
- Saturday June 7 11am-*Mass of Praise and Thanksgiving* at St. Andrew's Roman Catholic Cathedral. 7pm Alumni and Friends *Gala Dinner* at the Victoria Conference Centre. Tickets \$100.
- Sunday June 8 12-6pm *Victoria Family Picnic* on the grounds of St. Ann's Historic Site.

For more information visit <http://www.friendsofstannacademy.com>

## EDITORIAL BOARD

Lois Blais, Diana Bright, Lynne Esson, Beth Fitzpatrick (Chair), Naomi Miller, Ethel Warbinek, Sheila Zerr. The History of Nursing Newsletter is published 4 times per year. Submissions are welcome. Deadline for submissions for the next issue is **June 15th, 2008**. Please submit articles and news items to Sheila Zerr ([srzerr@telus.net](mailto:srzerr@telus.net)).

## ANOTHER AWARD FOR VERNA SPLANE



*By Sally Thorne*

At a recent ceremony at the University of Toronto, Verna Huffman Splane was awarded an honorary doctor of science degree. Although this award represents only one of many top honours Verna has achieved over the course of her remarkable career, it was a particularly meaningful tribute from her own alma mater. On that occasion, with her characteristic sense of humour and perspective, Verna told the convoking class: "To receive a degree at the venerable age of 92 from the institution that introduced me to academia in 1938 is indeed an honor to be cherished, and I am grateful to all those who brought it about. The fact that I am some 65 years older than my fellow graduates simply means that some of us are a little slower than others."

A graduate of the Diploma in Public Health Nursing at the University of Toronto (1939), Verna went on to obtain degrees from Teacher's College, Columbia University and from the University of Michigan. Among her many senior professional leadership roles were her position as Principal Nursing Officer, National Health and Welfare Canada (1967-1972). Following her federal government advisory position, she went on to an outstanding career representing Canada at the international level, including serving as President of International Social Service Canada (1974-1983), Vice President of International Social Service, Geneva (1984-1990), and Chairman, Committee on International Affairs, Canadian Nurses Association (1982-1986). For this lifetime of work, she has been granted many high honours, including Officer of the Order of Canada (1996), and honorary degrees from the University of British Columbia (1996), St. Francis Xavier University (1989), and Queen's University (1980).

In what they modestly referred to as "retirement," Verna and her husband/collaborator Richard Splane have sustained an outstanding level of international activity and leadership, continuing to network with influential individuals within government and non-governmental health organizations internationally. They regularly host large and small events at which "new recruits" to the international health arena have the opportunity to meet and exchange ideas with seasoned leaders, and have maintained networks around the world that keep Canada linked with current initiatives and activities.

Without question, Dr. Verna Huffman Splane is a great Canadian, and one who has brought honour to this country and to the various institutions with which she has been associated. A role model for the epitome of energetic "retirement" (she once indicated she had accomplished more in the 25 years post retirement than in the same period beforehand), she has raised the profile of nursing, social service, health care, and international development. We owe a great deal to the legacy she has created and owe it to her to take up the challenge. Congratulations Dr. Splane!

**HISTORY OF NURSING ANNUAL GENERAL MEETING**

DATE: Thursday April 17, 2008 TIME: 4 PM - 8 PM

PLACE: CRNBC BOARD ROOM 2855 Arbutus Street Vancouver

**Program**

1. AGM - come hear the reports

2. Supper break - \$15 pay at the door

3. Discussion of Ongoing Challenges:

The future of Professional Practice Groups

New Website

PLEASE RSVP by Friday April 11th: Catering & room arrangements need to be finalized.

Lenore at [lenoremail@lightspeed.ca](mailto:lenoremail@lightspeed.ca) Kathy at [k\\_murphy@telus.net](mailto:k_murphy@telus.net) or (604) 739-6931

**IT'S TIME FOR HIGH TEA AT HYCROFT MANSION!**

BC History of Nursing Group Invites you:

Friday, May 9, 2008 from 2 - 4 PM

Cost: \$40 with tax receipt for \$10

Address: 1489 McRae Avenue, Vancouver (East of 16th & Granville St.)

Speaker Ivan Sayers: Museum Consultant and Fashion Historian

**"Corsets and Health in the 19th and 20th Centuries"**

RSVP : BY FRIDAY MAY 2, 2008 TO: LENORE RADOM

10095 No. 5 Road, Richmond, BC, V7A 4E4 [ make \$40 cheque payable to BC  
History of Nursing Group]

Hycroft is the home of the University Women's Club of Vancouver.

Kathy Murphy is a member of the UWCV.



## FEATURE ARTICLES

*Editor's note: We begin by sharing two stories submitted by Naomi Miller who always manages to send us such interesting and sometimes humorous historical accounts.*

### Recruiting Nurses for East Kootenay's First Hospital

The first St. Eugene's Hospital was a sturdy log building on the bank of St. Mary's River at the Indian Mission near Cranbrook. The Canadian Pacific Railway was building a rail line from Fort Macleod to Kootenay Lake. In the construction camps men were dying like flies, victim of a typhoid fever called "Mountain fever." In November 1897 Father Nicolas Coccola was visited by Mr. Haney who pleaded for help in caring for these men. Father Coccola (who had had some medical training in his youth) replied that he had no place to receive the patients and he could not neglect his mission. Mr. Haney asked, "What prevents you from building a hospital? If you get nurses I will provide you with doctors." Father responded, "A hospital requires money". Haney gave him not only a cheque to pay for a building to be erected but also two passes good on any railway, plus cash for traveling expenses to get nurses.

Father Coccola contracted with some Catholic parishioners to erect a building suitable to house up to forty patients then left, accompanied by Sister Conrad, Superior at the Indian Residential School. They traveled by sleigh to Golden and by train to New Westminster. There Father Coccola met Bishop Durieu to ask permission to go in search for nurses. The Bishop laughed. "What Sisters will accept a hospital in your Kootenay?" Mildly the priest murmured, "Give me permission and leave the rest to me."

Coccola and Sister Conrad went to Seattle where there was "no encouragement." Then they went to Portland where the Sisters of Providence were willing to do all that they could to help, having already their Sisters in St. Eugene's school. The Portland convent found one recruit then wired Mother General in Montreal. Father Coccola aptly put it, "I leave with one hostage. Mother General will surely provide the balance. We need six nurses."

Even while the hospital was under construction patients arrived seeking attention. Starting in December 1897 Sister Melitine and Sister John of Egypt did what they could in a tumbled down house recently evacuated by the priests. These ladies had to make their way to the school through mud and snow for meals and their own lodging. In March 1898 three more Sisters arrived. The new hospital opened May 1, 1898.

During the summer, illness affected dozens of workers. At one point the nurses were caring for 80 patients, 40 in their simple log hospital and 40 convalescents in a huge tent. Mother Superior from Montreal arrived with a companion Sister at the peak of the epidemic. Sister Conrad lay seriously ill with the disease so word was sent out for more help. Two more Sisters arrived from Portland. The Sister Superior from Portland stayed until Christmas when the crisis was over.

Mr. Haney returned in the spring. He and his inspectors were surprised at how many had been treated with so little percentage of deaths. "In other hospitals men went in to die. What was your secret?" The Sisters answered, "Cleanliness, fresh milk and good whiskey!"

The railway construction was completed. The track did not pass through Fort Steele and the Mission as originally planned. The nearest station was seven miles away at the emerging community of Cranbrook. Colonel



Baker donated five acres of land, plans were made and a new hospital built. The CPR arranged to supply water to the new building and to pay the salaries for Drs. King and F.W. Green. On February 1, 1901 the sick were transferred from the hospital at the Mission to the new St. Eugene's Hospital, Cranbrook. Sister Mary Nazareth, as Superior, with six companion Sisters went to staff the new building with Father Ouilette as Chaplain. That second hospital was run by the Catholic Sisters until 1968 when a district general hospital was opened in Cranbrook to replace St. Eugene's. There is no record as to whether the Bishop ever acknowledged Father Cocola for his good work in recruiting early nurses for the Kootenay.

*The source of this information was primarily from the Memoirs of Father Nicolas Cocola in the book THEY CALL ME FATHER by Margaret Whitehead, 1988. Some supplementary information came from CHRONICLES OF ST. EUGENE HOSPITAL, by Sister Hortense Quesnelle, manuscript 1970*

*"High Water – Living with the Fraser Floods" by Dr. K. Jane Watt of Fort Langley received the prestigious Lieutenant Governor's Medal for the best historical writing published in BC during 2006. It was published last summer by the Dairy Industry Historical Society of BC. The award was presented to the author by the Lieutenant Governor at the BC Historical Federation's Annual Conference at Government House in Victoria on May 11 2007. The book attracted attention in the spring of 2007 as the Fraser River threatened to flood again. Much of the documentation was a collection of personal memories. The following account was written by Mrs. Fran Berry.*

### **Nursing on Barnston Island**

"I was a public health nurse in Cloverdale and in Surrey. We had only three, then four nurses covering all of Surrey. Barnston Island was part of my district so I used to go over about once a month to a school and a baby clinic and that sort of thing. When the flood happened we didn't have health inspectors resident. There was someone in Victoria who would come. What I had to do was take water samples.

I think that there were three houses around Barnston that were feeding the dyke workers. They had people from all over the place filling up sandbags to build up the dyke. I had to pick up food supplies that the Red Cross ladies in Cloverdale were preparing then take it over and drop it at these three spots. I asked what they wanted for the next day. I was one of several taking food over for a couple hundred dyke workers. This went on for about a week then the dyke broke.

We had to take stuff to purify water. After the dyke broke there were concerns about typhoid. We did immunizations just for the immediate crisis. In those days you didn't have sterile syringes, you had to boil stuff up. You'd go over with whatever syringes you had, do as many shots as possible, then boil them up again on somebody's stove. I clearly remember having to row into some of the houses and onto the next yard to do the immunizing.

One interesting thing: there was an old timer who was NOT going to move, thank you. He had sat out the flood of 1894 and he was going to sit out the flood of 1948. I happened to be on a barge that went over when they barged his beef cattle off—there might have been 25. The poor guy. He was pretty mad at the army. He had an old building and I guess he thought more of it than the army did because they used it for firewood.

One of my pet stories is about one of the ladies who was feeding the dyke workers. I asked her if there was anything she needed. She said, "We could sure use a bottle of rum." I went to the liquor vendor in Cloverdale late at night. He opened up his store and for the next few days I took a few more orders. (not exactly what you were meant to be doing as a government worker!)"

*Editor's Note: Our second featured article is by Sheila Youmans, a 1962 Vancouver General Hospital School of Nursing graduate with a Bachelor of Arts (majoring in History) from Trent University (1997) and a Master's degree from the University of Victoria (2000). The following article is based on Sheila's Master's thesis Delivery Of Medicine To The Northwest Region Of British Columbia, 1880-1960.*

## RURAL NURSING IN THE NORTHWESTERN REGION OF BRITISH COLUMBIA, 1880-1960

*By Sheila Youmans*

Without the sustained efforts of dedicated nurses, much of northern British Columbia would have been denied health services. Yet, the nurses themselves benefited from their work; rural nursing offered adventure, independence, an answer to a religious 'calling,' and a variety of challenging nursing situations. Some women worked alone or with a few others in isolated missionary outpost hospitals and nursing stations or small-town hospitals. Others did public health for the Canadian Red Cross Outpost Division in areas such as Bamfield, Cecil Lake, and McBride, as were federally funded nurses, hired by the Department of Indian Affairs, in towns like Vanderhoof and Bella Coola and later by First Nations bands on reserves such as Stoney Creek and Kyuquot.

Fortunately, their broadly-based training gave these women (few men entered the profession) a solid foundation of knowledge on which they could draw as they cared for the community by visiting the elderly at home, farmers in their fields and forestry workers at their camps as well as serving those who came to their clinics or hospitals. Their work extended from the delivery of babies to the preparation of bodies for burial and often they had to deal single-handedly with unexpected emergencies and medical complications. For instance, Rebecca Bancroft, a Red Cross nurse at Kyuquot outpost, visited logging camps, traveled yearly by boat to Tahsis to dispense polio vaccine to school children, and, journeyed to Esperanza to assist Dr. H. Mclean in scheduled or emergency surgical procedures and anaesthetics. In time, technology eased some of the problems.

Missionary nurses were the first in the field. As early as the 1890s, the Women's Missionary Societies of the Methodist and the Presbyterian Churches (after 1925 the United Church of Canada) recruited nurses for small outpost hospitals as in Atlin (1898) and Francois Lake (1919). The Societies also sent nurses to assist missionary physicians in the mission hospitals at Port Simpson (1892), Bella Bella (1902), Hazelton (1904), and Telegraph Creek (1905); or as missionary field matrons (home-based nurses employed by Christian Churches who took the place of doctors) in areas such as Skidegate on Queen Charlotte Island (1905).

Not all nurses came as missionaries. When Mr. and Mrs. George Pitts-Turner arrived on the Queen Charlotte Islands, in 1912, to make a living, Mrs. Pitts was immediately hired by Dr. John Spencer to assist him at the Methodist Mission Hospital at Skidegate. There, she brought countless babies into the world and was often paid with eggs or poultry. At near-by Queen Charlotte City, Lottie (Duval) arrived in 1909 from Winnipeg to work at the local hospital. She resigned the next year to marry Archie Duval, the local blacksmith and logger, but over the next forty years was called upon whenever there was a serious illness or accident. Because the isolated community was often without a doctor or only had an elderly physician who couldn't hold a practice anywhere else, she had much independence and duties beyond those usually taken by nurses.

Independence of thought and action and freedom from administrative and medical authority appealed to some nurses. In nurse-managed outpost hospitals or nursing stations on any shift, they performed diverse tasks

including making decisions about appropriate diets or medication for patients. An emergency could overlap with the birthing of a baby, the care of a dying patient, or a pediatric trauma. Marjorie McDowell, matron at the United Church R.W. Large Hospital at Bella Bella from 1940 until 1957, recalled with pleasure how she enjoyed working in a variety of settings: case room, operating room, public health, pediatrics, and general duty.

Even in hospitals with a resident physician, nurses had opportunities to broaden their experience. For example, during the summer months of the 1890s, Nurse Miss Spence traveled from Port Simpson with Dr. Alfred Bolton to oversee the medical needs of First Nation peoples on the Skeena River. While she engaged in public health procedures, such as physical examinations and inoculations, others managed the Port Simpson Hospital where Ethel Pierce recalled that as well as delivering babies and attending to emergencies, nurses at the hospital had to act as local undertakers, preparing and dressing the deceased, ready for burial.

In time, public health became a more important component of rural nursing whether or not the nurse had additional public health training. Nurses educated their clientele in cleanliness, nutrition, and preventive and curative measures—that is, in ways to keep healthy. Because these nurses often went into homes, they were able to focus on the particular needs of an individual patient or family. For instance, hospital matron Marjorie McDowell did not organize public health clinics, apart from a monthly pre-natal and post-natal clinic at the hospital; she believed she performed a more valuable service by seeing patients in their homes.

Most Red Cross nurses did have formal public health training. In conjunction with the BC Provincial Board of Health, the Red Cross established a three month diploma programme in 1919 at the new University of British Columbia. A decade later, the Red Cross began opening Outpost Hospitals and Nursing Stations in BC. Between 1930 and 1965 the society managed 18 outpost hospitals, varying in size from one to ten beds. Physicians visited the stations on a monthly basis and some outposts were able to draw on the services of nurses resident in the community for relief work. For instance, Mollie Fullerton, the first nurse in Bamfield in 1939, upon her retirement, became the community relief nurse. Similarly, Jessie James, in Atlin, (1961-80) was the relief nurse for several years before assuming full responsibility. Once a community could take over the financial responsibility of maintaining the hospital, the Society withdrew. In 2005 the remaining six outpost hospitals were transferred to the BC Regional Healthcare system.

Nurses often stayed for many years in the community because they married local residents, were married to missionaries or physicians, or answered an inner 'calling.' Some of the second generation of nurses working with the missions, such as Margaret Butcher, who worked at Kitimat Residential School from 1916 until 1919, entered the field as a way of earning a living and, like many others, she had a short career as a rural nurse.

Staffing was always a problem in rural hospitals. Doctors often relied on local aboriginal or white girls to assist them in performing simple nursing tasks. The Methodist Hospitals sought to solve the problems by copying a common practice of hospitals elsewhere, namely offering a three-year training program. This gave young women in the various communities an opportunity to get a nursing education close to their homes and at a minimum of cost. Dr. Alfred Bolton established a hospital training school at Port Simpson (1893); Dr. Richard Large at Bella Bella (1902), and Dr. Horace Wrinch at Hazelton (1904). These training schools also drew some students from afar. For instance, Ethel Pierce (Freeman) came from Ontario in 1919 to train at Port Simpson. After graduating,



she served as assistant matron and night supervisor at the R. W. Large Hospital for four years before returning to Port Simpson as hospital matron. As part of a growing interest in the professionalization of nursing, the Registered Nurses Association, expressed concern for the need for uniformity in training and therefore opposed training schools in smaller hospitals. As a compromise, in 1924, new regulations required trainees to complete their last year at Vancouver General Hospital and in 1932 all of the small training schools closed down.

Rural nursing was not for every caregiver. One drawback was the lack of anonymity. In small communities a nurse might be a wife, a mother, or a member of the local church. However, her role as a nurse gave her a note of distinction among her fellow citizens. As possibly the only health professional in the community, frequently she was asked questions while out socially or be called upon while off duty. Sheila Chambers, the Red Cross nurse who worked at Bamfield, served as the local veterinarian, pharmacist, and social worker.

Another problem was isolation and distance—geographically, socially, and professionally. Although some women thrived on running outpost stations, others left their respective hospital or outpost station because of the lack of social and professional contact. For example, Bessie Banfill stayed among the Nuuchahnulth at Ahousat for only six months; Marjorie McDowell mentions many nurses were disillusioned and, as a result, the hospital was often short staffed. Over work also contributed to nursing shortages. For instance, Lucie Pringle, nursing-superintendent of Burns Lake Hospital, left after one year because the work was too taxing; Elizabeth Mitchell left Atlin because she was worn out.

Yet, where two or more nurses worked together, isolation could produce camaraderie. In the early twentieth century, an era of maternal feminism, women's missionary and nursing work was grounded in a nurturing or social form of feminism. Flora Moffatt and Margaret Butcher wrote about friendships among the female staff at their respective institutions. In reality, conflicting motives and ambiguous perceptions of their work and surroundings were evident. For instance, Butcher took delight when Mrs. Moore, a settler's wife, ostracized the village missionary nurse, Miss Sarah Alton, possibly because Mr. Moore spent a great deal of his time away from home building Miss Alton's home. When it came time for her confinement, Moore asked Butcher to care for her.

Transportation was a challenge for nurses as they often traveled many miles through snow or mud, walking on dirt roads or trails where wild animals lurked, riding on horseback or in an open cutter, or riding in small boats to care for their clientele. Red Cross nurses spent hours escorting patients to the nearest medical centre and waiting for return transportation. Nurses at the Red Cross outpost at Bamfield often had to travel in hazardous weather conditions to the Pachena Lighthouse for which they were responsible. Hughina Harold, the nurse at Village Island, frequently accompanied First Nations in their boats to tend to an ill person. On one occasion, at a nearly deserted Native village, she found a young child suffering from pneumonia. She arranged to have the youngster taken to the Columbia Coast Mission Hospital at Alert Bay. Another time at a small encampment where she found an unconscious man, she marshaled some villagers to flag down a passing tugboat in order that an S.O.S. could be sent to the mission hospital ship, the Columbia.

The introduction of modern transportation and communications dispelled many nursing challenges but did not completely eliminate them. For instance, it takes ten hours to transport patients from Cecil Lake to Fort St. John or two hours from Atlin to Whitehorse. Nevertheless, the introduction of the radio telephone did improve

medical care as well as easing the sense of isolation. When Bella Bella got a radio telephone in 1947, Flora Moffat found it greatly eased the sense of loneliness for the staff and made medical work easier. Moffat cited the case of a husband who was transporting his wife in his fish boat from Kitamaat, a distance of one hundred and fifty miles. After giving birth to twins at home, she suffered a severe hemorrhage. Because of the phone, the hospital had blood transfusions ready when she arrived and the mother survived.

The introduction of air travel allowed for the evacuation of critically ill patients who, after being given first aid and stabilized, could be flown elsewhere for specialized care. One of Moffat's most challenging cases was a man who walked into the hospital at 6 a.m. with only a blanket for protection. His boat had caught fire and sunk. Second and third degree burns covered most of his body. Moffat managed to get him stabilized before sending him to a Vancouver hospital where he remained for several months. Yet, nurses still had to exercise judgment because emergency evacuations by air were expensive. At the tiny Red Cross nursing station at Rivers Inlet, the nurse admitted patients requiring 24-48 hour nursing care and sent others to Bella Bella by boat or plane depending on the seriousness of their problem.

Historian Kathryn McPherson has suggested that single women in a rural society were marginalized. While rural nursing in BC allowed a significant number of women to support themselves (Alton had a thirty year nursing career), McPherson maintains rural gendered social structures were constricting. In an urban setting, independent working women were ubiquitous and accepted, but in rural areas, where farmers and miners wives worked without pay, nurses were often viewed as spinsters seeking husbands. Although this cannot be stated for every situation, the aforementioned conflict between Nurse Alton and Mrs. Moore illustrates McPherson's statement about single women being perceived as a threat. She argues that nurses in isolated areas ameliorated this prejudice by justifying their presence through helping needy settlers and First Nations peoples. By doing so, nurses "stood socially superior" and were viewed as "missionaries of the state."

Early missionary nurses in the northwestern region of the province did espouse the imperialist notion of humanitarianism tainted with cultural superiority and the right to rule. Historian Mary-Ellen Kemp refers to this process as colonial humanitarianism in which early medical physicians and nurses combined a sense of obligation to save souls and heal Native bodies with the idea that cultural change was essential in order for Indigenous peoples to survive. For instance, Butcher was delighted First Nations were "so recently brought from savagery" and, although they suffered immensely from various diseases, "they lived longer for being civilized." Yet, Natives had mixed responses to western medicine and missionary intrusions into their beliefs and practices. While some Aborigines integrated European therapies into indigenous healing arts and cultural values, other First Nations either rejected or partially accepted westernized medicine and values. Although western medicine eventually took precedence over Native practices, today incorporation of indigenous herbal remedies can be found in alternative medicine.

Whether women were attracted to rural nursing because of a religious need, adventure, or a desire to gain independence, they wielded more authority than their urban peers. Leadership and courage personify rural nurses as frequently they were put in decision making positions. In the absence of doctors, nurses became hospital administrators, delivered babies and coped with emergencies. Public health procedures were commonplace, with teaching an important secondary element. From this vantage point, nurses could be called "missionaries for health." The

lack of anonymity, coupled with isolation and distance posed problems for many rural nurses. As a consequence staffing small hospitals or outpost stations has remained a challenge. In summary, nursing in remote areas requires a generalist approach in which a nurse can be described as needing to be "all things to all people" as these examples from northwestern British Columbia demonstrate.

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- Moffat, Flora. "One Foggy Morning." BC Medical Association Archives. Dr. Adam C. Waldie Fonds, Research and Writing-Biography File, Dr. George Darby, Box #3, File1-3. Reminiscences, Christmas 1976.

## College of Registered Nurses of British Columbia Interviews

- Freeman, Ethel (Pierce) Oral History Project, Call Number 20, 1987
- McDowell, Marjorie (Thompson) Oral History Project, Call Number 101, 1976
- Moffat, Flora. Oral History Project, Call Number 100, 1976.

## NEWS ABOUT MEMBERS

Congratulations to member **Cathy Ebbehoj** who recently received the 2007 Canada Award of Excellence from the Association of Women's Health, Obstetric and Neonatal Nurses (AWHONN). The honor recognizes Cathy's outstanding contribution to the care of women, mothers, newborns and families.

Welcome to new member **Moya Jack**. Moya was a nursing sister with No 7 Canadian Military Hospital (1939-1946) and served in Halifax, Debert (Truro, NS) Military Camp, England, France, Belgium, Holland, Germany.

Congratulations to student member **Jennifer Dunlop** who was recently awarded our History of Nursing Scholarship. In her research studies she is examining the role of nurse anaesthetists in Canada. She will look at a number of time periods in which nurse anaesthetists practiced, how this role was challenged and why it never became a formalized specialty in Canada.

*For members who have already sent in their 2007 membership applications, we thank you! For those who have not done so, this will be the last issue of the History of Nursing News that you will receive and for your convenience, we are enclosing another Membership Application Form. If you have recently sent in your membership, we may not have processed it yet, and we apologize for this reminder.*

### Celebrating Our Nursing Sisters

A delicious buffet lunch and networking opportunity for members and friends of the History Group took place on November 17, 2007 at the Vancouver Lawn and Tennis Club. **Adrian French**, curator, spoke on the Military Museum at Jericho. The 45 guests included 7 nursing sisters. Seen in the picture below from left to right are: seated— Moya Jack and June Newton and standing—Joan Doree, Helen Niskala, Nina Rumen, Jessie Middleton and Shirley Riddalls.



### CAN YOU HELP BOB?

Member Bob Nitychoruk from Victoria writes "I am researching the graduation pins and related proficiency awards issued by Canadian Nursing Schools, with the idea of publishing a book of photographs of the pins. The publication may be titled By Stamina and Scientific Accomplishment: The Graduation Pins from Canadian Schools of Nursing. Included will be a short biography on each of the schools and when available, photographs of nursing graduates as well as the physical buildings that housed the various Schools of Nursing".

Bob has prepared an attractive brochure which describes this ambitious project in detail and identifies some specific publications that he would like to read and an extensive list of nursing schools for which he has little or no information. The British Columbia Nursing schools are: Burrard Sanitarium, Vancouver BC (1902-1915), Chemainus Hospital, Chemainus BC (1918-1925), Chilliwack Hospital, Chilliwack BC (circa 1918), Fernie Hospital, Fernie BC (circa 1918), Grand Forks Hospital, Grand Forks BC (1915-1940), Hazelton Hospital, Hazelton BC (1904-1932), Kootenay Lake Hospital, Nelson BC (1912-1934), and Nicola Valley Hospital, Merritt BC (1914-1932).

For further information on this project or how you can assist, please contact members of the History Group Executive for a brochure or contact Bob at [bobnity@shaw.ca](mailto:bobnity@shaw.ca).





### HISTORY MEMBERS IN COSTUME

Members of the History of Nursing Group attended the Continuing Nursing Education Forum for First Nations and Inuit Health Branch nurses on January 30, 2008. Their costumes and displays were a great hit. Sheila Zerr, Lenore Radom and Michele Eng (seen above) attended the January 30 session. Sheila Zerr wore a 1920s Victorian Order of Nurses Uniform, Lenore Radom dressed as Amelia Douglas circa 1860s, and Michele Eng dressed as a 1960s student nurse. Cheryl Entwistle and Margaret Saunders attended on February 6th.

Lenore's Amelia Douglas costume inspired the nurses to plan a special project for Nurses week focusing on Amelia's aboriginal routes and her contributions to early health care in Victoria. Two hundred of the History group's note cards were purchased to be distributed during Nurses week 2008.

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## FROM THE LITERARY WORLD

*Book Reviews by Glennis Zilm*

Stannard, M. (1873). *Memoirs of a professional lady nurse*. London: Simpkin, Marshall. [Printed by W.H. & L. Collingridge, London]

This interesting autobiography tells the life story of a nurse of the mid-1800s, who, incidentally, spent three months nursing in B.C. about the mid-1860s. Mrs. Stannard (no maiden name) was born in England, probably around 1825 or so (no dates) to what might be termed a lower-middle-class family. She had schooling both at a Christian boarding school for elementary grades and at a higher school. She was a strong Church woman (no denomination given, but possibly a Methodist). She married a young builder and, after they moved to London, she applied as a pupil nurse at the Bethlam Royal Hospital but, as they had no openings for pupils, she was taken on as a hired attendant, learning nursing as an apprentice. After a time (no dates), she moves to the Queen Charlotte Lying-in Hospital as "an indoor pupil."

In 1853, she and her husband take an "emigrant ship" (rather than a passenger ship) for Australia as he wants to try his hand at the gold rush there. On the ship, she is hired to assist the ship's doctor, who was ill. She assists in the delivery of five babies, and in the care ill adults and of five small children, who, unfortunately, die. In Australia, she constantly finds work as a nurse first in Melbourne, then, once she joins her husband in the gold rush areas, both there and in surrounding neighborhoods. The couple spend what would appear to be about two years or more (no dates given) in the gold fields, but then he is murdered. She returns to Melbourne, and works for a while as a head nurse in a hospital there. Then a wealthy couple hire her as a companion for the wife on a return voyage to England aboard the *Dover Castle*. This apparently enables her to become known to the captain and the passenger line authorities, and she is taken on as a nurse for several crossings of the Atlantic aboard passenger steamers. At the end of Chapter 18, she is back in London "not thoroughly well" (p. 149).

She then, on the recommendation of a physician, accompanies a lady (obviously a wealthy one) on a trip from Glasgow around Cape Horn and there, during a storm (which she prayed to end and it did), she delivered a baby to the captain's wife. She writes excellently of the trip aboard the *Kent*: the sighting of a whale and many birds, the catching of a shark. Pages 160 to 211 deal with her visit to British Columbia. They arrive in Esquimalt (p. 160) and they stay in the Victoria area for about a month. It might be possible to date this visit, because they are entertained at a ball to celebrate the captain's marriage (since he was last there) and the birth of his son. It would appear to be sometime in the early 1860s; it is winter, since she several times remarks about beauty of the snow on the trees. She and the captain's wife go by steamer to New Westminster. The captain brings his boat to Burrard Inlet and then comes to New Westminster to visit the women and takes them the next day on a sleigh ride (p. 162). They go to Vancouver to see the mill [Hastings Mill?]. While in New Westminster, she attempts to instruct "the natives" in religion using a mixture of English and Chinook [sic: Chinook], and she includes two pages (170-171) of a Chinook dictionary. She includes several illustrations (although they do not reproduce well in this copy) of "the natives" (e.g., of a "medicine man, Barclay Sound) and some interesting descriptions. Because the wife of the captain now is well, and the ship is to remain longer, she transfers to another ship to return to England. This ship returns to Victoria laden with lumber for the return voyage; page 180 contains an engraving of Victoria. She

visits the Indian village across the harbor from Victoria, and the next day attends a small service of "blacks" in Victoria. This section is heavily illustrated.

The Governor at the time was Kennedy. The Captain of the *Kent* puts an ad in the paper for her and her services [should be able to find it]. Mrs. Stannard stays on to help with the accouchement of another woman in the district (p. 203), continuing to visit the Indians in a missionary manner. After about three months total, she leaves by coastal steamer, going down the coast to San Francisco where she transfers to a steamer bound for Panama, with stops in Mexico. She must travel by train across the isthmus – and the travel descriptions are great. At this time she is once again engaged as a nurse, to look after a baby on a voyage to England. She talks about this at the end of the Panama trip, when they have difficulty getting baby food (pp. 219-221). After reaching New York, she (with the family for whom she is working) takes another steamer (on the "Inman line") back to Liverpool.

She is back at home when she receives word that the baby born in Burrard Inlet to the captain of the *Kent* had died in Mexico and the *Kent* later had been in collision with a steamer, and sank, in American waters (near San Francisco). She then takes a job for a "medical gentleman" as his head nurse, then later accepts a post as matron of a hospital in a coal-mining area. She concludes her book with the story of a dying coal-miner who had been badly burned in an explosion (and tells of the religious comfort she brought to him).

Knowledge of this book is important because it contributes to the nursing history of a "career nurse" of the late 1800s and offers previously little-known insights into nursing of this period. The book is viewable free online at: <http://www.canadiana.org/ECO/ItemRecord?id=dd2a41c435693f76>. There also is a copy of the book in the B.C. Archives, but probably a more "accessible" one for interlibrary loan would be from Simon Fraser University, which has a photocopy (as well as a microfilm copy) made from the B.C. Archives one.

Ritchie, Margaret B. (2007). *A History of Nursing through Philately*. Limekilns, Fife, UK: Teragram. (Soft cover, 62 pp., illustrated color.)

Every nurse can learn a great deal about the history of nursing world-wide from this delightful little book by a Scottish nurse and stamp-collector extraordinaire. Margaret Ritchie, a retired British nurse, has collected and reproduced, in color, some 161 stamps recognizing nurses and nursing, and also identifies 9 others that she has not yet managed to find. Beside the illustration of each stamp is a brief note related to its recognition of nursing history. Individual nurses honored range from St. Benedict (480-547 AD), to Canada's Elizabeth Smellie (1884-1968), to near-present-day nurses such as Dame Nita Barrows (1916-1995). Perhaps surprisingly, the likeness of Florence Nightingale appears on only four of the stamps and only one, from Belgium in 1939, is specifically dedicated to her.

As Ritchie notes in the introduction, unless one is a member of royalty, having one's portrait on a postage stamp is an honor usually reserved for heroes and heroines. Countries that have chosen to acknowledge the work of nurses and nursing range from Australia and Aruba to the U.S.A. and United Kingdom, and include such diverse nations as China, Iceland, Ethiopia, and Vatican City. Ritchie has identified seven Canadian stamps that honor nurses or nursing, including one issued in 1930 that features Mount Edith Cavell. Another will be issued by Canada Post in 2008 to recognize the 100<sup>th</sup> anniversary of the founding of the Canadian Nurses Association.

Occasionally, one wonders about inclusion of some of the stamps, such as the one from Great Britain is-

sued in 1997 and featuring King Henry VIII, whose tie to nursing is that his divorce from Catherine of Aragon triggered the reformation and the dissolutions of Catholic religious orders, leading to closure of almost all hospitals throughout the kingdom. Another stamp, issued by Japan in 1958, honors the discovery of the stethoscope, but as Ritchie points out, this tool is now indispensable to nurses and midwives. But browsing through it, one discovers just how esteemed are nurses, nursing, and health care. And one learns quite a few lessons about the history of nursing around the world.

The book was published in a limited edition in Scotland and now is in relatively short supply. A copy has been donated to the Library of the College of Registered Nurses of British Columbia to make it available to nurses in this area. Have a look at it.

## NEW BOOKS

Grypma, Sonya. (2008). *Healing Henan: Canadian Nurses at the North China Mission, 1888-1947*. Vancouver: UBC Press. (Hardcover, 292 pp., illustrated.)

This book, based on Sonya Grypma's doctoral thesis, describes the roles and lives of Canadian Presbyterian (later United Church) missionary nurses in China during a turbulent period of war and revolution. The thesis was sparked by a small collection of letters from nurses that told of their experiences when western medicine was being introduced into the Henan province of northern China. The resulting thorough and academic study makes a major contribution not only to history of nursing, but also to history of church history and theory, to feminist history, to medical history and, most importantly, to China-Canada cultural relations of this important era. Furthermore, it is highly readable and interesting. Dr. Grypma is a member of the B.C. History of Nursing Group.

Smyth, Elizabeth (Ed.). (2007). *Changing Habits on Women's Religious Orders in Canada*. Ottawa: Novalis. (Soft cover, 340 pp., illustrated)

This interesting new collection of essays includes one by B.C. historian Jacqueline Gresko, former president of the B.C. History Society, on the Sisters of Saint Ann in B.C.; although it is mostly on the teaching role of the nuns, the Sisters of St. Ann also gave the first nursing care in Victoria and founded St. Joseph's Hospital there. The book also has an essay by Sioban Nelson, nursing historian and dean of the faculty of nursing at the University of Toronto, on the Sisters of Providence and their work in health care in the Pacific Northwest. The book is a great addition to studies of religious orders in Canada, many of whom brought nursing care to frontier areas. Nursing history researchers will be interested in it for that reason.

Donna Yates-Adelman. (2005). *Yes, Sister: Memoir of a Young Nurse*, Publisher: Shore line ISBN 1-896754-44-9, soft cover, 254 pages \$23.95

Set against the sprawling beauty of western Canada in the 1960's *Yes, Sister* is the intensely personal story of the heart, humour, and courage that go into the making of a young nurse at Calgary's Holy Cross Hospital. The author is a motivational speaker and healthcare advocate. For more information on this book and the author, visit [www.yessister.ca](http://www.yessister.ca).



Jocelyn Hezekiah, *Breaking the Glass Ceiling: The Stories of Three Caribbean Nurses*, Publisher: Trafford Publishers [www.trafford.com](http://www.trafford.com) or from the author directly ([jhez@primusca](mailto:jhez@primusca)), ISBN 1-4120-1517-0, soft cover, 254 pages \$34.95.

The author presents a narrative of the lives of three extraordinary Caribbean women who gained both regional and international recognition in their struggles to direct their own professional affairs. Jocelyn Hezekiah, originally from Trinidad, West Indies is a nursing education consultant in Burlington Ontario. She was associate professor of nursing, McMaster University, Hamilton Ontario from 1987 to her retirement in 1997.

### Donated to the History of Nursing Group's Book Archives

A book containing a couple of reprints was recently donated by Jacqueline Gresko to the History of Nursing Group's book archives: *Synopsis of Midwifery and Gynaecology*, by Aleck W. Bourne, 3rd ed., (Bristol, 1925), with an inserted ad for *Control of Conception* by Robert Latou Dickinson and Louise Stevens Bryant (Williams and Wilkins Co. Baltimore), and a reprint of "Elective Painless Rapid Childbirth: Anticipating Labor," by Harry Koster and Louis Perrotta, in *Experimental Medicine and Surgery*, Vol. I, No. 2, May 1943. Dr. Gresko, a former president of the B.C. Historical Federation, had picked these up at a rummage sale, and although they are not in very good condition, they offer some fascinating insights into the ways that nurses viewed obstetrics and gynecology in the 1920s. The Group has quite a large collection of maternity and obstetric books which are used frequently in displays, especially at the University of B.C. School of Nursing.

### ARTICLES IN PRINT

Zilm, Glennis (2008) Nurses associations: their past, present and future. *Canadian Nurse*, 104(1), p 44.

The author presents an historical perspective on the development of nursing associations across Canada and expresses concern about the changed mandate of today's associations as they become colleges.

Pauly, Bernadette, Goldstone, Irene, McCall, Jane, Gold, Fiona and Payne, Sarah (2007) The Ethical, Legal and Social Context of Harm Reduction. *Canadian Nurse*, 103(8), 19-23.

The authors examine the ethical, legal and social context of harm reduction. This helps guide nurses so they can provide safe, competent and ethical care for people who use illicit drugs

## IN MEMORY OF.....

**Barbara Ruthven Logan Tunis**, author of *In Caps and Gowns: The Story of McGill's School for Graduate Nurses*, published in 1966, died in December 2007 in Ste. Anne de Bellevue, Quebec, at age 87. Born in Vancouver in 1920, she dropped out of an arts program at UBC when the Second World War began in 1939 and obtained a nursing diploma, then enlisted as a Nursing Sister. After the war, she enrolled in McGill University and in 1946 obtained one of the first Bachelor of Nursing degrees awarded by that University. She joined the Victorian Order of Nurses, and eventually became an assistant nursing supervisor. Her book on the history of nursing education at McGill was one of the first such histories and was described by the *American Journal of Nursing* as "a telling record of the struggle for higher education for nurses and the contribution of nurses to the establishment of an essential education service." Tunis was also a co-ordinator of a centennial exhibition of medical history at McGill. She wrote extensively about medical licensing in Lower Canada in the 19th century and was something of an authority on the early days of public vaccination.

**Jean Frances ("Fran") Sutherland** (nee Ferguson), of Edmonton, 1914-2008. Fran was an associate member of the B.C. History of Nursing Group for several years and a generous benefactor to the BC History of Nursing Scholarship Fund. A graduate of the Royal Alexandra Hospital School of Nursing, she joined the Royal Canadian Army Medical Corps in 1942 and served overseas in England and Europe and then volunteered for duty in the Pacific theatre of war. She established a school for nursing aides in Calgary and spent five years with the World Health Organization helping to establish nursing programs in Ceylon. She served as a president of the Alberta Association of Nurses and was on several committees of the Canadian Nurses Association.

## SURFING THE WEB?

*By Glennis Zilm*

This web site contains every Canadian Nurse journal put out from 1904-1980; although it takes a long while to download each volume, you get really great reproduction.

<http://www.archive.org/search.php?query=canadian%20nurse>

All persons interested in the life of Florence Nightingale will be glad to know that the best biography of her, the official biography by E.T. Cook, [The Life of Florence Nightingale](#), originally published in 1913, is now available, for free, on the internet. It has a fabulous, easy search facility (there are 11 references to cholera, and each one lights up in turn!). There are two volumes:

<http://www.archive.org/details/lifeofflorenceni01cookuoft>

<http://www.archive.org/details/lifeofflorenceni02cookuoft>

Members can also check out the Web site of the Museum of Health Care at Kingston, which now has four online exhibits. One of the most interesting is Name that Artifact, a fabulous little "historical quiz" to test your knowledge of health care artifacts. Visit:

[www.museumofhealthcare.ca](http://www.museumofhealthcare.ca)

## NIGHTINGALE NEWS

Lynn McDonald, project director for the Collected Works of Florence Nightingale, alerts us to the following:

Nightingale has been featured on the stamps of many countries. Dr Gwen Prout has kindly provided excellent photos of her comprehensive collection. Go to [www.sociology.uoguelph.ca/fnightingale/stamps/index.htm](http://www.sociology.uoguelph.ca/fnightingale/stamps/index.htm).

The year 2010 will mark the 100th anniversary of Nightingale's death. Do any organizations have plans to mark it?

The year 2008 marks the 150th anniversary of one of the most important pieces of research by Nightingale, and work still scarcely known, her monumental; Notes on Matters Affecting the Health, Efficiency and Hospital Administration of the British Army Founded Chiefly on the Experience of the Late War. Presented by request to the Secretary of State for War. London: Harrison 1858. The 567 page volume was originally intended to be a "précis" for the secretary for war (Lord Panmure) giving Nightingale's detailed analysis of what went wrong in the Crimean War.

As Ms Nightingale quipped, on **why doctors should not be in charge of hospital administration**: "As for doctors, civil and military, there must be something in the smell of the medicines which induces absolute administrative incapacity. And it must be something very strong too, for they all have opportunity for developing administrative capacity." (Letter to Sidney Herbert 26 May 1859, Wiltshire County Record Office 2057/F4/68.)

## MORE DATES WORTH NOTING!

**Canadian Society for the History of Medicine** will be held at the University of British Columbia, **May 30-June 1, 2008** as part of the Congress of Humanities and Social Sciences. At least one of our B.C. History of Nursing Group members – Sonya Grypma – will be presenting.

**CAHN/ACHN 2008** conference, hosted by the Faculty of Nursing, University of Toronto, is an international conference to be held **Thursday June 5 through Saturday June 7, 2008**. For more information visit [www.cahn-achn.ca](http://www.cahn-achn.ca).

**The Canadian Nurses Association** will be holding their 100th anniversary June 15-18, 2008 in Ottawa. More information can be found at [www.can-aaiic.ca](http://www.can-aaiic.ca).

**Women's History Network of BC Conference** – Theme: Women and the Law – will be held in Victoria in **October 2008**. Dates and further information will be announced later.

## BC History of Nursing Professional Practice Group

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[www.bcnursinghistory.ca](http://www.bcnursinghistory.ca)

  
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