

**TB Nurses in B.C.
1895-1960:
A Biographical Dictionary**

A record of nurses who worked to help bring tuberculosis
under control during the years it was rampant in B.C.

by

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and

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This version contains minor corrections

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PREFACE

Names of nurses who gave care to Tuberculosis patients in the late 1800s and early 1900s often were not included in contemporary accounts; the work of these nurses, like work of most women in this era, was taken for granted and not considered worthy of mention by recorders of the time. Only occasionally would a name be included. We believe, however, that these nurses, who were in the front lines of the battle against TB, should be known and remembered.

A preliminary report identifying 27 nurses involved in TB care in B.C. was prepared for the 1997 International History of Nursing Conference, which was sponsored by the Canadian Association for the History of Nursing and the B.C. History of Nursing Professional Practice Group. Following that project, we began adding names and biographical notes whenever we came across further material. Whenever possible given time and financial restraints, we actively searched for information on individual nurses working in TB care. Both of us also work on other projects involving collection of B.C. nursing biographies, and this proved helpful.

Unfortunately, information on nurses working in TB in B.C. in the early years is sparse and scattered among uncatalogued collections throughout the province. Even nursing's own histories contain little information on nurses' fundamental roles in anti-TB campaigns. Except in rare instances, names of many nurses, even individuals who made significant contributions, have not been recorded. Furthermore, under the B.C. Privacy Act passed in 1996, access to many records now is limited. Much of this research is time-consuming and costly.

We attempted to answer three major questions about early TB nurses:

1. Who were the early TB nurses in B.C.?
2. What did they do?
3. Where did they work?

This new collection identifies and gives biographical sketches of 20 nurses who played major roles in the development of tuberculosis (TB) care in British Columbia between 1895 and 1960. In addition, we identified and obtained limited background on 60 other TB nurses. As well, we identified and listed in tables the names of nurses who worked in various TB agencies. Although this collection represents many hours of research, it may be but the tip of the iceberg. We would appreciate hearing about nurses who should be included or receiving further information about those who are identified. We also hope that this collection will provide a starting point for other researchers who may wish to delve into more detail for each of these biographies. For example, it might be possible to follow up information on each of these nurses by searching in various newspapers for obituary records; we did attempt some such searches, but indexes of obituaries for many early newspapers in B.C. are not available.

The report opens with a history of the TB facilities in British Columbia, and identifies the places where nurses practised. This unique chapter brings together information that has not previously been compiled. The report also contains a major bibliography and reference list related to this project. We identify, as well, the major repositories of materials relevant to TB nursing in B.C. We believe this research may be applicable in other provinces and for other researchers.

We would like to express our appreciation to the many, many individuals who so willingly assisted us in finding and compiling this information. We would especially like to thank the regulatory and library staff of the College of Registered Nurses of B.C. and other librarians and archivists who provided valuable assistance.

This collection should be considered a “work in progress,” and provide a starting point for other researchers who may wish to add to the information and to delve into more detail. But B.C.’s TB nurses deserve recognition and their contributions deserve to be appreciated. This is a beginning “thank you” to them.

May 2006

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I. HISTORY OF TB NURSING IN B.C. 1895 - 1960

A major portion of the history of tuberculosis care in B.C. is intricately linked with the provincial tuberculosis hospital at Tranquille, which provided care for patients from 1907 to 1957. B.C.'s early TB nurses, however, provided care in homes before the hospital opened, as well as doing case searching through schools and clinics and working in special TB wards in many hospitals. The move to community nursing in B.C. is closely linked with tuberculosis, for it was the need to identify and care for TB patients that prompted local school boards, health units, and anti-TB societies to hire nurses. The province hired a medical health officer to deal with spread of contagious diseases, including TB.

Church organizations were the first to bring nurses to B.C. communities. The Sisters of Saint Ann initiated nursing services in Victoria in 1858 during the B.C. gold rush. Other gold rush centres opened small hospitals, most of them community supported rather than financed through churches. As the two West Coast colonies grew, the capitals at Victoria and New Westminster developed larger hospitals. After Florence Nightingale established her school of nursing in 1860, many Canadian hospitals, including those on the west coast, opened schools based on this model. Some graduates then established small private hospitals in their homes, often specializing in care of "consumptives" (patients with pulmonary TB). Unfortunately, few archival records exist of these entrepreneurial nurses. In Vancouver, the Anglican Church founded a hospital under Sister Frances Redmond in Vancouver in 1887 and the Canadian Pacific Railway (CPR) established a small tent hospital in 1886 when the city was designated the terminus for the railway.

The Victorian Order of Nurses of Canada, a national non-profit organization founded in 1897 in Ottawa, offered subsidized home care, and its nurses first arrived in B.C. in 1898. Most of the VON care was given in the patients' homes, but a few communities also established VON hospitals. The VON post-graduate training included special content on TB care.

The pioneer nurses emphasized the three recognized essential elements of TB care: rest, good nutrition, and fresh air. Care was mainly open air treatment, with emphasis on warm, absorbent clothing, good food (especially eggs, milk, cream, butter, and suet), a great deal of outdoor rest, and some exercise if the patient could tolerate it without suffering from over-fatigue. Cod liver oil – up to a tablespoon or more three or four times a day – was administered for all kinds of TB. Early nursing journals featured articles related to tuberculosis care, and TB nursing became recognized as one of the first specialties.

The first publicly-funded nurses involved in TB care in B.C. were those hired by local school boards concerned about spread of contagious diseases among children, and which hired graduate nurses to supervise health. Probably the first school nurse in B.C. was hired in New Westminster about 1909. The first provincial health centre was established in 1919 in Saanich, near Victoria, and the public health nurses supplied sputum cups and bottles for TB tests, arranged X-rays and did patient and family teaching (Green, 1984).

General hospitals of the time generally provided treatment only for critically ill TB cases. This care was given in infectious disease wards or in isolation cottages or in tents on the grounds.

The first TB ward at Victoria's Royal Jubilee Hospital was a wooden cottage for male patients opened in 1910 and expanded to six beds in 1913; it was torn down in 1917 (Pearson, 1985).

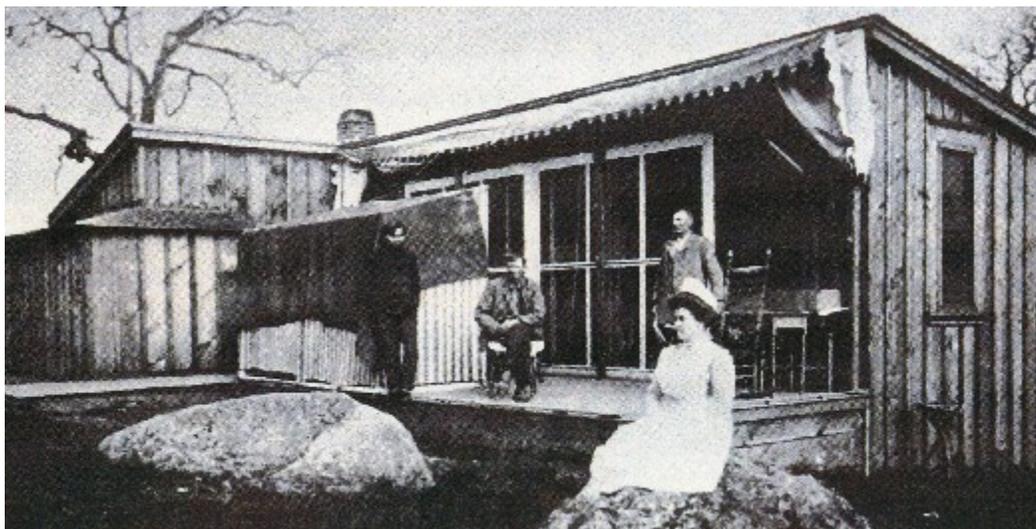


Photo 1.1. Student Nurse Winona Orr (later Carruthers), who graduated in 1912, is shown in front of the TB "pavilion" (cottage) on the grounds of the Royal Jubilee Hospital, Victoria. (Photo from Pearson, 1985; photo may be from RJH files.)

Most nursing of consumptives was done in the home, often by private duty nurses if families could afford such care. Wealthy patients soon adopted the medically recommended practice of moving to dry, mountainous climates to "take the cure." This usually involved a stay of a year or more of rest in a secluded resort, where high altitude was supposed to make for easier breathing.

The first lay group in Canada for education of the public about TB was formed in Ottawa in 1900, following patterns established in the United States. These anti-TB societies, also called leagues, saw isolation of individuals with TB as a way to protect families, workplaces, and communities. These groups advocated publicly-funded tuberculosis "hospitals" – called sanatoriums – to isolate infected individuals, protect families and communities, and provide a healing environment.

The "B.C. Society for the Prevention and Treatment of Consumption and other Forms of Tuberculosis" held its first meeting in Victoria January 21, 1904. The B.C. plan was to raise funds for an isolated provincial hospital for TB and to lobby the provincial government for assistance. The Society soon raised \$58,000 to establish a sanatorium. Although the Victoria-based organization had a provincial name, it also was concerned about care within the city boundaries and hired two TB nurses for general supervision of care and for case-finding and

follow-up.

In 1907, all the B.C. leagues united as branches of the renamed "Anti-Tuberculosis Society of the Province of British Columbia." The provincial body took over the funding-raising and administration for the provincial sanatorium. It was decided that this should be established at Tranquille, where there already was a facility. During the 1890s, two large ranches on Tranquille Creek near Kamloops had begun to accept "consumptives" as boarders. The infected individuals lived in small cabins or tents near the ranch houses and generally took care of themselves as long as they were able. Mary Cooney Norfolk, daughter of rancher Charles Cooney, became well known as a "lay nurse" under the supervision of Kamloops physician Dr. R.W. Irving (Norfolk, 1979). Mrs. Fortune similarly looked after boarders at the Fortune ranch and offered good food and some care (Hatfield, I, n.d.).

Tranquille Sanatorium

Once the provincial body had raised the funds, it purchased the two ranches as the base for a hospital. The Tranquille Sanatorium, TB treatment centre for all B.C., opened for only 10 patients on November 28, 1907, with Dr. R.W. Irving as medical director and Jean Matheson as lady superintendent. By 1910, the hospital had accommodations for 49 patients and employed four nurses and 12 attendants. Its official name was the King Edward Sanatorium and it used the ranch property, called the Alexandra Ranch, to grow food and raise animals both for sanatorium use and as a financial enterprise. Mary Thomas succeeded Matheson as superintendent of nurses in 1913 and the same year some of the older buildings were closed and new ones erected.



Photo 1.2. The original hospital building at the Provincial Tuberculosis Sanatorium on the Tranquille Site, renovated from the main house of the Fortune Ranch in 1907. (Source: Kamloops Museum and Archives Photo #1034.)

Typical care of TB patients at Tranquille during the early period was light nursing, with emphasis on teaching self-care and prevention of spread of infection, and education of families. Cost for care at Tranquille in these pre-insurance days was \$55 a month and average length of stay was 200 days. Isolation from families meant less spread of the disease; on the other hand, family life was considerably disrupted. Patients were nursed on large, screened verandas in the fresh air, even in winter. One nurse recalled that nurses wore coats to provide care, and when patients were awakened at six a.m. for temperature routines they had frost all around their faces and on the tops of the blankets (Walker, 1987). In Tranquille's first 18 months of operation, 66 patients were discharged; only six patients had died.

In 1910, a new main building, called the King Edward Building, was opened, providing accommodation for 49 patients, 4 nurses, and 12 attendants (Hatfield, I, n.d.). The original ranch house and cottages were used for advanced, highly contagious cases. When the full complement of 88 patients in the expanded facilities was reached in November 1912, there was a matron and a staff of seven nurses (in addition to the medical director and an assistant medical superintendent).



1.3. King Edward Sanatorium, Tranquille's new main building, circa 1920s.

In 1914-1915, artificial pneumothorax was first used at Tranquille for treatment and an operating room was opened; before that, some surgical procedures were carried out at the hospital in Kamloops. Between 1915 and 1930, construction continued and the Tranquille site expanded rapidly as the need for beds grew, especially related to the large numbers of soldiers who returned to Canada suffering from TB.



Figure 1.4. Physician carrying out a pneumothorax procedure, circa 1930. Photograph was taken at Vancouver General Hospital. Nurses are Constance Cooper, supervisor of the TB Building, and Miss Hawke, assistant supervisor.

The old buildings were gradually torn down and replaced. One continuing need throughout the years was for improved accommodation for nursing and other staff. There are indications that as early as 1919 nurses protested the inadequate accommodations, which contributed to nursing shortages at various times in Tranquille's history.



Figure 1.5. Nurses at Tranquille protesting the poor accommodations for nursing staff, circa 1919. (Source: Kamloops Museum and Archives Photo #5298.)

In the late 1910s and early 1920s, TB was still of epidemic proportions in B.C. although it was slowly being brought under control. In 1919 the death rate from TB in Vancouver was 143 per 100,000; in 1923 it was 123 per 100,000. However, the control was mainly for the mainstream white populations. For example, in 1922, the death rate for Asians was 440 per 100,000 and for the "white population" was 78 per 100,000; the figure for First Nations people in B.C. may have been up to 20 times higher (Norton, 1999).

In 1921, the provincial government took over the running of Tranquille from the Anti-TB societies, and slowly assumed responsibility for TB care. Fund-raising activities continued to be directed through the Anti-TB societies throughout the province. In 1927, the national association introduced a Christmas Seal campaign, which the B.C. association also supported. At first B.C. money went to visiting nurses and then travelling clinics, but later was also used for the preventoriums.

In 1931, nursing students began to be sent by their hospitals for a two-month rotation at Tranquille to give them some background in TB care. This program was discontinued at Tranquille in 1943 and nursing schools began their own programs. The provincial government also began using "travelling clinics" based out of Tranquille for case-finding. A mobile van was purchased using money raised through the Christmas Seal fund-raising campaign.

Construction languished during the Great Depression of the 1930s, but Tranquille continued to run at full capacity. When the provincial government established the Division of TB Control in Vancouver in 1935, the centre for administration gradually moved away from Tranquille, although it remained the largest TB treatment centre in the province, eventually housing more than 300 patients. With the introduction of the new anti-TB drugs in the late 1940s, and the growth of other TB care facilities, the end was in sight for Tranquille.

Therapeutic drugs radically changed the treatment of TB. If TB were detected at an early stage, it could be controlled by a combination of rest and antimicrobial drugs; this made home care possible, and hospital care declined. Streptomycin was the first effective antibiotic against TB; it was developed in the United States immediately following World War II (1945) and was available in Canada by 1948. Para-aminosalicylic acid (PAS), which had been developed in Sweden, was introduced soon after to increase the effectiveness of the antibiotic. These antimicrobial drugs were joined after 1951 by the even more effective and cheaper isoniazid (INH) (see especially Norton, 1999, pp. 160-161).

Advances in surgical techniques and improvements in anaesthesia made chest surgery more effective, especially among the young, and patients recovered more quickly. As a result, TB rates, which had been 200 per 100,000 in the early 1900s and 57 per 100,000 in 1946, fell to 25 per 100,000 in 1952 (various sources, including Norton, 1999, and Wherrett, 1977).

In the early 1950s, the capacity at Tranquille was 410 beds, and there were about 200 staff. However, sanatorium care was no longer necessary. In October 1958, Tranquille ceased to be a TB Sanatorium and was transferred to Provincial Mental Health Services as a training school

for “mentally defective” males and females. For a partial list of medical and nursing staff at Tranquille, see Appendix A.

Rotary Clinic

Early on, nurses became recognized as sound educators about TB prevention and care and by 1913, at least six B.C. cities (Victoria, Vancouver, New Westminster, Kamloops, Mission, Comox) had anti-TB societies and hired nurses either on a full-time or part-time basis depending on the funding available.

Local service organizations, such as the Rotary Clubs, National Council of Women, and the Imperial Order of the Daughters of the Empire (IODE), provided strong support for the educational prevention campaigns. For example, in 1914 the Rotary Club of Vancouver began raising money for a large free-standing TB clinic because B.C.'s per capita death rate from TB was the highest in Canada. Aided by the Rotary Club funds, the Anti-TB Society hired Isabelle Maud Hill to do case finding and follow-up visiting in Vancouver (Hatfield, I, n.d.). By 1918, the Club had raised almost \$80,000 for a free clinic (Alterio, 2005a).

In January of 1919, the long-awaited Rotary Clinic was opened in under Dr. Charles H. Voorman. The Clinic was located on Cambie and Pender Streets, near Victory Square, on the same site as the City Hospital (before that became Vancouver General Hospital and moved to the Fairview site). In 1920, it also began to receive municipal grants.

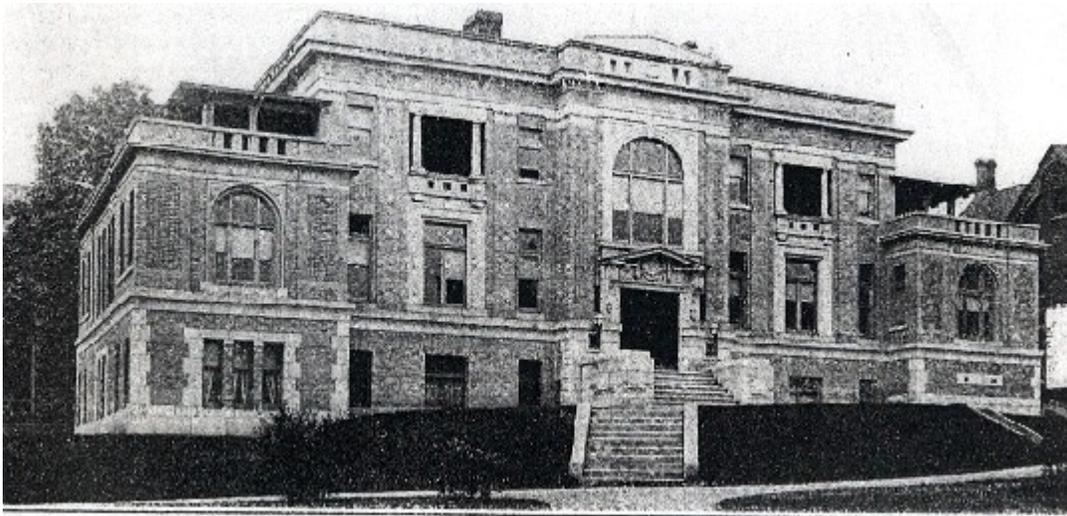


Figure 1.6. Rotary Clinic, a Vancouver TB clinic with facilities for diagnosis, case-finding, and follow-up care, opened in 1919.

The staff included a medical director, two nurses, and a technician; in addition, there were two “district” or visiting nurses who travelled by car to do some case-finding and follow-up care for patients in the home. In the 1930s when Vancouver city health department could not fund the necessary visiting nursing services for TB patients, the Rotary took on the funding until the city could once again finance it (Alterio, 2005b).

The Clinic, which ran until 1933, was an exemplary facility with some of the latest technology. For example, in 1922, the Clinic installed "an alpine lamp" for treatment of tubercular bones and joints, for discharging sinuses, and for general body radiation. This institution also had x-ray, laboratory, dispensary, open-air school, rest verandas, and a diet kitchen.

Examinations were free for those who needed care but were unable to pay for medical assessment. About 25 per cent of those examined proved to have TB. To give some idea of the numbers, 6,291 patients came for consultation in 1926. The Clinic nurse took the initial history, and temperature, weight, and height. Following came a thorough physical with a fluoroscopic exam, and a chest x-ray; rest verandas were used for patients where the diagnosis "is not complete." Patients came from 9 to 5 daily for observation, temperature records, and sputum examinations, and received a hot lunch, and milk before leaving.

As about one-quarter of those sent to the clinic for initial assessments were children, the Clinic initiated an open-air school, funded entirely by the Rotary Club, with accommodation for 25 children, who also received lunches and nourishments. The Rotary Club also offered two-week “fresh-air camps” during the summers for children at risk for TB; up to 30 children at a time could attend these camps. As well, Von Pirquets, early tuberculin tests using the scarification technique, were done on all school children at the Clinic (*TCN, 1923, 19* (10), 599-601). For a partial list of nursing staff at the Rotary Clinic, see Appendix B.

Preventoriums

Despite the increasing emphasis on public health control, there were large and increasing numbers of children being diagnosed with TB. In the early 1900s, largely because of the spread of TB through milk from TB-infected cows, many children were crippled with spinal and joint (knees and hips) TB. The public health authority began to destroy infected herds as a precautionary measure. However, pulmonary TB remained rampant in families who lived in crowded, poor quality housing when one or more of the adults in the family contracted the disease. These children often needed prolonged and specialized therapy and rehabilitation even when the acute phases of the disease were over. Care in adult hospital facilities or even in pediatric wards often failed to meet the long-term needs (such as schooling) of children suffering from TB. By the 1930s, the need for specialized children’s facilities for TB was apparent. In B.C., the needs of children with serious crippling as a result TB prompted the province’s Women’s Institutes to raise funds for “crippled children’s hospitals,” especially in Vancouver and on southern Vancouver Island. These special long-term care hospitals included rehabilitation therapies and involved schooling for the young patients.

The result was the opening of Preventoriums or solariums, which were independent

facilities for care of children up to age 14. Preventoriums were designed for long-term care of tubercular children, usually from families in which TB was rampant and where there was little money or support for care in the home; solariums cared for both disabled or crippled children as well as those with TB.

The **Queen Alexandra Solarium** at Mill Bay (also called Malahat Bay), on southern Vancouver Island, was opened March 1, 1927 with 32 beds. This special hospital for “delicate and crippled children” (Wace, 1927) was to take advantage of the treatment that called for lots of

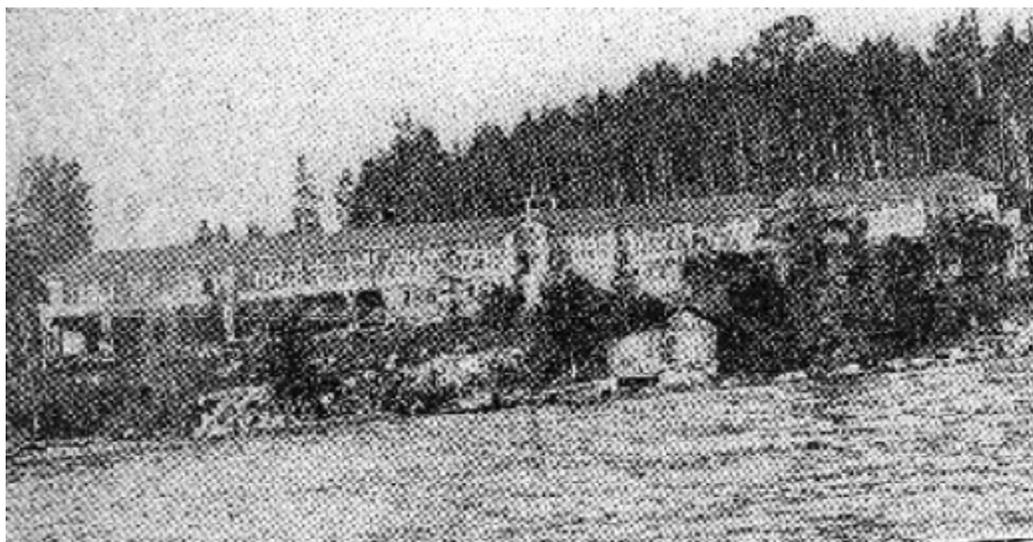


Figure 1.7. Queen Alexandra Solarium at Mill Bay, circa 1927 (Wace, 1927).

sunshine and “sea-bathing” in a special pool. A concrete salt-water, tidal, swimming pool was built on the shore of the 6.5-acre site, with concrete paths leading from the hospital for easy transport of stretchers and wheelchairs. In the annual report for 1933, it noted that of the 373 children who had been treated, more than one-third were affected with some form of TB.

The nurse in charge was Miss H. I. Willis, with Miss E.H. Wace appointed as assistant to the medical superintendent and in charge of the plaster work and splints. Both had received training at Alton, which apparently was a TB hospital in England. From the photographs, it appears that the Solarium used the typical sleeping porches.

The **Vancouver Preventorium** opened in 1931 in the Grandview area of east Vancouver and ran until the 1950s when it became a pediatric chronic care facility. The need for long-term care for children with TB began to decline in the late 1940s and the Preventorium admitted more and more children with other long-term illnesses, crippling diseases, and post-polio care; however, occasional outbreaks of TB led to admission of groups of children.

Figure 1.8. Vancouver Preventorium, circa late 1930s.



Initially, a large portion of the funding came from the Rotary Club and the Imperial Order of the Daughters of the Empire (IODE). The IODE provided funding for equipment, and both organizations provided continuous support and routinely had representatives to the Board. Donations and support for the Preventorium came from numerous sources. In 1931, there were 33 major donations from various clubs and individuals; for example, one man undertook full maintenance and beautification of the grounds. The Vancouver City Council and the Welfare Federation each defrayed half the cost of maintenance for the \$14,000 agency.

The staff consisted at first of a Supervisor and Assistant Supervisor, both graduate nurses, two nurse assistants, one of whom was on night duty. (For a partial list of nursing staff at the Preventorium, see Appendix C.) Originally, the facility was planned for not more than 25 children and for children under age 14, but soon children in their later teens were also admitted. A school teacher was supplied by the school board from the hospital's inception. In 1934, the capacity was raised to 31 children. Cost per child per day was \$1.50.

The Division of TB Control finally took over the running of the Vancouver Preventorium in 1935 and controlled admissions. The capacity was raised to 40 beds and was officially open to children from throughout the province. When TB admissions began to decline in the 1950s, the Preventorium was rebuilt in 1958 as the Princess Margaret Village, a 70-bed hospital for children, and this was never more than one-half occupied by TB patients. In 1965, the hospital became a long-term-care and rehabilitation facility for children with chronic illnesses, and was renamed the Sunny Hill Hospital for Children.

TB among First Nations Peoples

Although TB rates among First Nations peoples in B.C. always were at least 20 times higher than for the general population, facilities for their care were seriously lacking. Natives were not eligible for admission to Tranquille and most city hospitals with TB wards also discriminated against Natives. Generally speaking, the health care system of early B.C. turned a blind eye to TB among First Nations peoples. For example, a report to the Canadian Tuberculosis

Association in 1935 showed that although Native Canadians formed only 3.7 per cent of B.C.'s population, 35 per cent of the deaths from TB occurred in the Native population (Wherrett, 1977, p. 110).

Some care for Native Canadians with TB was offered at the Methodist Residential School at Coqualeetza (for what is now called the Sto:lo Nations, near present-day Chilliwack). The School had opened in 1888, and by the early 1900s a ward had been opened for care of the large numbers of children with TB. The medical missionaries continuously expanded care although the federal Department of Indian Affairs did not get involved in its support until about 1915.

In 1927, the federal government appointed UBC Professor Dr. H.W. Hill, along with Dr. C.H. Voorman and Dr. A.S. Lamb, to survey the problems related to providing care for First Nations peoples. In their report, they proposed a new 200-bed facility at Tranquille with 100 beds to be set aside for Native patients; because of disagreements between federal and provincial authorities, nothing ever came of this proposal.

By 1935, Coqualeetza was the second largest residential school in Canada and the federal government was taking a greater role in its administration and in its now enlarged TB wards. A ward at the Vancouver General Hospital had opened and provided some care for native patients. However, provincial/ federal disagreements continued and TB care for First Nations peoples was sporadic. For example, only Natives who were veterans were eligible for admission to Tranquille until well after World War II (1945). The remoteness of many "reserves," inadequate case-finding, lack of follow-up, and lack of financial assistance for those who required hospitalization meant that TB rates remained higher and the quality of care lower than for the general population.

In 1941, the School burned down and the entire facility was converted into a 100-bed Sanatorium for both children and adolescent Aboriginal peoples, the first such large federal facility for Canadian Indians. Dr. W.S. Barclay was appointed medical superintendent, and began expanding the services to include some adults. The hospital had field nurses who would visit various Reserves throughout the province for case finding, TB education, and follow-up care. By 1942, the hospital had reached capacity of approximately 135 patients. In 1943, the average age of the TB patients was 16 years, but the oldest patients were 73 and 76 years old. In 1945, the hospital had a staff of three doctors, 20 nurses, and 20 aides. In 1947, the average stay for a TB patient was 20 months; 600 patients had been treated and discharged since the new hospital opened in 1941. (For a partial list of nursing staff at Coqualeetza, see Appendix D.)

The Provincial TB Division and the B.C. TB Society supported this work, which was primarily funded by the federal Indian Health Service. In 1946, the Division also converted two former military hospitals into care centres for TB among First Nations; the former Air Force Hospital seven miles from Prince Rupert at Miller (occasionally spelled Millar) Bay and the former Army Hospital at Nanaimo were administered from Coqualeetza and the three centres provided TB care for the province's approximately 35,000 registered Indians.



Figure 1.9. Coqualeetza TB Hospital, about 1946.

Coqualeetza TB hospital was partly destroyed by fire in 1948. A new modern wing was opened in 1953 to bring the total number of TB residents there to 190, with one building specifically for children. By this time, however, improvements in care because of TB drugs and improved surgery led to shorter stays and patients with other conditions were also admitted. The last TB patients from Coqualeetza were transferred to Pearson Hospital in Vancouver in 1968 and Coqualeetza became, for a short time, a general hospital administered by the federal Department of Indian Affairs for First Nations patients from the southern part of the province. The hospital was eventually closed and First Nations patients then cared for in local hospitals.

Even today rates of TB among First Nations Indian and Inuit peoples remain unreasonably higher than for the general population and screening, prevention, education, and lack of treatment and follow-up continue to be problematic.

Provincial Health Division and Willow Chest Unit

As early as 1920, the B.C. government recognized the need for coordinated care for TB patients. In 1921, it took over financial responsibility for Tranquille Sanatorium from the anti-TB society and the Provincial Health Department began coordinating care through its newly established public health units. In 1935, the Health Department established a Division of TB

Control and appointed medical director Dr. W.H. Hatfield to coordinate care of TB throughout the province. The Division had links with Tranquille and other TB units in general hospitals and hired case-finding staff and kept files on all TB cases. In 1936, the Division moved into a building originally built as the University of B.C. Arts and Administration Building; this had been the only permanent building of the original UBC campus left on the Fairview site next to the Vancouver General Hospital. When UBC moved to Point Grey, this building was turned over VGH and it became a TB facility for care of 95 advanced cases of TB. The Division of TB Control renamed this building the Willow Chest Centre. This building remained the headquarters for TB care until the late 1990s.

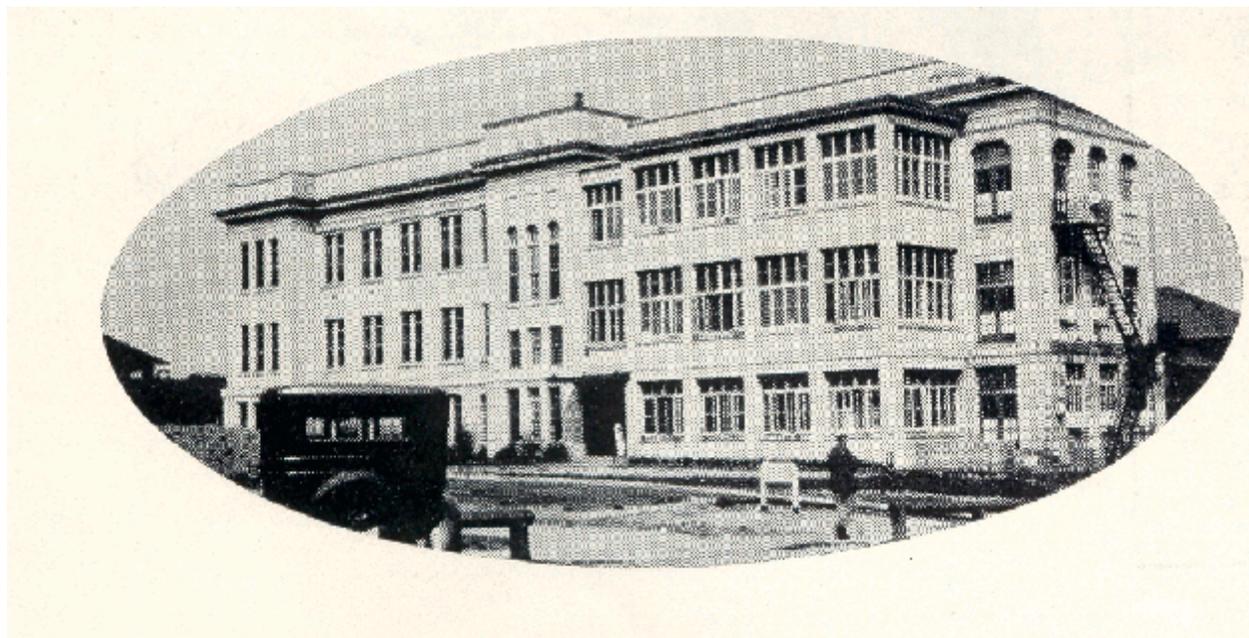


Photo 1.10. The old UBC Arts building which became the VGH TB building in 1925, and which later became the headquarters for the provincial Division of TB Control.

During the 1940s, the Division operated Mobile Chest Clinics that did x-rays and tuberculin testing in communities throughout the province. By the early 1960s, its main outpatient clinic at the Willow Chest Centre examined 45,000 patients a year and there were 93 treatment beds. As well, there was a Victoria and Island Chest Clinic, a New Westminster Stationary Clinic with headquarters for the Travelling Clinic for the Fraser Valley, and four travelling clinics in the B.C. Interior and the Kootenays.

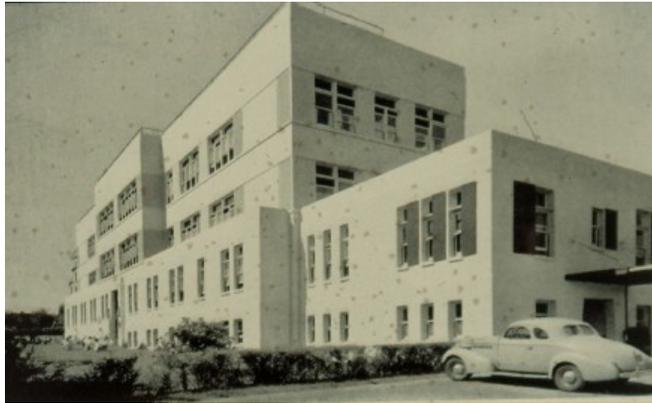


Figure 1.11. Willow Chest Centre Building, circa late 1930s. The Centre housed the headquarters for the Provincial Division of TB Control.

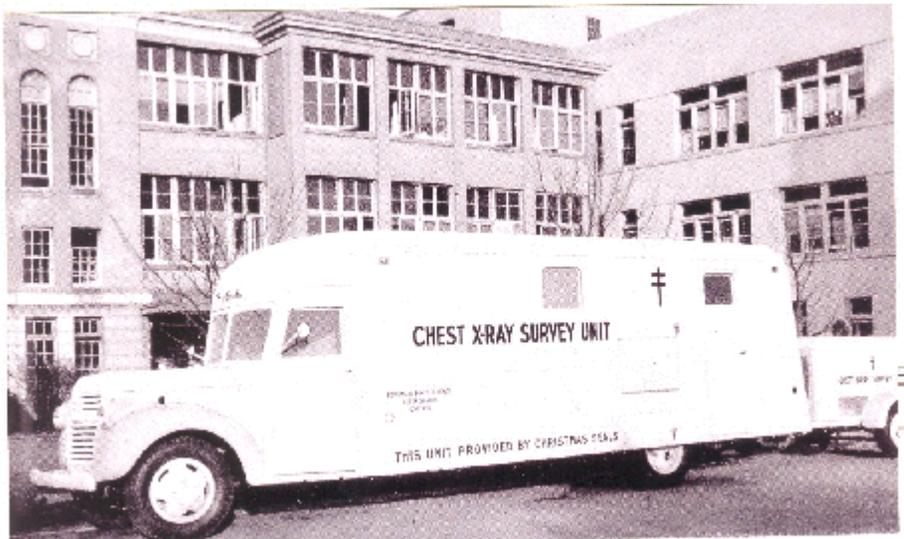


Figure 1.12. The Division of TB Control's first mobile chest X-ray unit, with its own electricity generating plant. The van travelled throughout the province to take miniature chest films to screen for pulmonary TB.

The mobile clinics used large bus-shaped vans that contained equipment for x-ray screening services. These could be set up in towns and communities, with the help of local public health units, the anti-TB societies, councils, and service clubs. Through well-publicized educational campaigns, the adult population was encouraged to visit and have a free x-ray and a tuberculin test. The clinics also performed tuberculin testing on infants and children, frequently through visits to area schools.

In 1944, the Division of TB Control set up a compulsory, six-week "TB Affiliation Course" for nursing students, the first in Canada. All nursing student in the province were required to complete the course. Until then only a small number of students actually had TB "experience" and this was at Tranquille and the large teaching hospitals in Vancouver and Victoria. Nursing leaders had advocated compulsory affiliation since the early 1930s. Nursing students were highly susceptible to TB, often because they were exposed to contact before they had received any lectures. For example, in 1936, nursing students and new graduates were 5.5 times more likely to get TB than the general female population in the age group 20-24 years, and seven times more likely than student teachers; the ratio of nurses to school teachers admitted to sanatoria in Canada in 1934 was 10 to 1 (Ferguson, 1936). Once the Division became involved in the educational program, it also offered educational experiences for public health nurses, clinical teachers and supervisors, and for practical nurses.

New Denver Tuberculosis Sanatorium

Another concern was the high incidence of TB among B.C.'s Japanese and Chinese populations. These two large ethnic groups within the province tended to provide early care within the family unit. "St. Joseph's Oriental Hospital" in Vancouver was established to provide care for more serious conditions, such as tuberculosis, and the Japanese community in Steveston (now a part of the City of Richmond) had a small hospital. Unfortunately, there was a tremendous stigma attached to tuberculosis, and a patient diagnosed with TB was shunned by the family and community, which made case-finding and care difficult.



Photo 1.13. Japanese Hospital in Steveston, circa 1897.

The first public health nursing supervisor, Muriel Upshall (q.v.) was appointed in 1936 by the Richmond School Board. She and Eileen Williams (q.v.) started two child health centres and initiated tuberculosis home visiting and screening among children at the Japanese kindergarten in Steveston (B.C. History of Nursing Group Archival Collection, M. Upshall fonds).

This was the situation in 1941, when War in the Pacific was declared and 22,000 Japanese Canadians – or Nisei – from the B.C. coast were rounded up and interned at the Pacific National Exhibition Grounds at Hastings Park in Vancouver before being sent under the authority of the B.C. Security Commission to internment camps. Most were moved to the Interior of B.C. but a small percentage were relocated in southern Alberta and Manitoba.

In the crowded camp conditions at Hastings Parks, it soon became obvious that TB was a special problem for the internees and the poultry building was converted into a hospital. A divider segregated the hospital into two units, with one designated for TB patients. Several of the Japanese internees were registered nurses, and they were paid \$1.25 a day – much less than non-Japanese nurses hired for the camp (Smith, 1977). Originally, there were about 125 internees diagnosed with TB. On March 31, 1943, 105 Japanese patients suffering from tuberculosis left Hastings Park Internment Camp by train for New Denver, B.C. The patients were accompanied by nursing staff from the Hastings Park hospital areas.



Photo 1.14. Irene Anderson (centre) with Japanese nurses and aides at the hospital at Vancouver's Hastings Park Internment Camp, in 1942. (Source: Hastings Park Hospital ..., 1996, p. 1).

The TB patients were sent to a Sanatorium that had been constructed in the orchard of an

Internment Camp at New Denver. The San was built by some of the 1,500 Japanese Canadians who had been moved earlier to five camps the Slocan/ New Denver area. The San housed patients throughout the War, providing the same standards as was provided in other TB facilities throughout the province. Radiology for the patients was carried out in nearby Nelson, B.C., and TB specialists from the Division of TB Control. (For a partial list of nursing staff at New Denver, see Appendix E.)

The 100-bed San remained open until about 1951 caring for TB patients, and then was converted in 1953 into a school for children from the local Doukhobor community (*Medical aspects ...*, c1979). The New Denver Internment Camp finally closed in 1957, with the property being deeded to the several hundred Japanese Canadians still remaining in the area.

TB Among the Military

A major factor in the rising incidence of TB in the 1910s was related to the large number of military personnel infected during World War I (1914-1918). Recognizing the need for care, the federal government began to pay a portion of the cost for veterans being treated in sanatoriums run by the anti-TB leagues, such as B.C.'s Tranquille Hospital. However, the Department of Veterans Affairs also began opening TB wards in military hospitals, such as Shaughnessy Hospital in Vancouver and in other military bases throughout the province. A former CP Hotel in the small town of Balfour in the West Kootenays was converted into a 70-bed military sanatorium in 1917 to cope with the large number of veterans who could not be accommodated at Tranquille. By the end of that year, the number of patients had increased to 120. Balfour San closed in 1920.



Figure 1.15. Photograph showing staff and military patients at Tranquille circa 1917. (Source: Kamloops Museum and Archives Photo #8612.)

During World War II, TB again became a major health problem. Following the War (1945) up to 300 TB beds were urgently needed. Existing federal military facilities, such as Vancouver's Jericho Base, were converted into sanatoriums. Jericho, administered by Vancouver General Hospital, closed in 1954, and patients were transferred to the new Pearson Hospital.



Figure 1.16. TB Hospital at Jericho Beach Military Base in Vancouver, circa 1949. Photo adapted from B.C. Archives G-02574; permission must be obtained for use other than research purposes.

Pearson Hospital

An important advance in TB care occurred with the opening of the long-awaited George Pearson Tuberculosis Hospital in Vancouver in the Spring of 1952. Although planned in the 1940s, this had been delayed because of World War II. Located on 57th Avenue near Cambie in south Vancouver, the hospital received the go-ahead from the provincial government in 1950, and was named after a former provincial secretary and minister of health.



Figure 1.17. Esther Paulson (left), first director of nursing at Pearson TB Hospital, which opened in 1952, is shown with two other unnamed senior staff. (Photo from the Esther Paulson Collection, B.C. History of Nursing Archives.)

It cost \$1.8 million and was a “cottage-style” hospital, all on one level. It was to eliminate the separate TB facilities at Jericho Beach, St. Joseph’s Oriental Hospital, and the Isolation Hospital at Vancouver General. By the time it opened, however, advances in antibiotic and other TB drug therapies were making long-term hospitalization a thing of the past. Pearson opened with 264 TB beds; almost immediately, 40 beds were converted for post-polio patients, and in 1955 a polio wing was added because of the 1950's polio epidemics. Pearson eventually became a long-term care hospital.

One other area where the incidence of TB remained high even during the 1950s was at B.C.’s Provincial Mental Hospital at Essondale. Because of the high rate there, Essondale opened its own sanatorium in the new North Lawn Pavilion on May 4, 1955 with 228 beds. Before the opening of the North Lawn Pavilion, mentally ill patients with TB were cared for at Essondale because of the need for specialized psychiatric care before the advent of tranquillizers and other new psychotherapeutic medications. In 1942, for example, tuberculosis claimed the lives of 34 patients out of a total population of around 3,400 (approximately 1 per cent). By the early 1960s, only 120 beds in the North Lawn Building were used for care of TB patients and, with the introduction of new TB medications, this gradually decreased even further and the North Lawn Pavilion became general care unit, with a 12-bed medical ward for seriously ill patients.

Summary

In the late 1800s, TB was pandemic and the world's leading cause of death. In British Columbia, the death rate in 1900 was at least 200 per 100,000 population. Although, other than surgery, there was no successful cure for TB until the late 1940s, by 1945 the provincial death rate had dropped to 55.3 per 100,000; once anti-tuberculosis drugs (essentially streptomycin, PAS, and INH) were introduced, the death rate in B.C. dropped to 3.9 in 1960 (Wherrett, 1977).

These dramatic declines were brought about through better scientific knowledge about the disease, improved sanitation and pasteurization of milk, better early diagnosis, isolation of infected individuals, enhanced medical interventions, and, especially, introduction of nurses into the community to carry out public education campaigns. Nurses, at first under private agencies or non-profit organizations and later through the public health department, did health teaching and carried out nursing care, case-finding, and follow-up of TB patients and families. Involvement of nurses was a new, important, and effective agent of change.

This section identified the places that B.C.’s TB nurses practised; until now, there has not been a comprehensive record of B.C.’s TB care facilities. There may have been other smaller, private hospitals and TB care in private homes, but it was impossible to identify these for this database. This section shows the growth of the major specialized facilities – sanatoriums, preventoriums, and clinics – and, as well, indicates that TB nursing developed into a specialty during these years.

II. B.C.'S TOP TWENTY TB NURSES

This section of the *Biographical Dictionary of TB Nurses in B.C.* identifies nurses who were active in TB care, prevention, and control during a period when the disease was a paramount threat to the health of British Columbians. We found collection of such nursing biography is a long, involved detective process – and can be both intensely rewarding and simultaneously frustrating and disappointing. Names of nurses, even of senior nursing leaders, were often not recorded even in reports from the agencies in which they worked. It is not that their contributions were unappreciated, but more a fact that even nurses themselves, until recently, have not bothered to document and preserve their stories and contributions.

This report contains information similar to that in the biographies for the Memorial Book at the Canadian Nurses Association, the Memorial Book at the College of Registered Nurses of B.C. (formerly the Registered Nurses Association of B.C. [RNABC]), and the B.C. History of Nursing Group's Biographical Files and Pages of History in the Helen Randal Library. This report, however, contains more names and more information than is in those repositories.

In this section, we identify 20 nurses about whom we were able to compile reasonably complete biographical notes. Most of these nurses played other major roles in nursing in B.C., and there is additional information available on their lives, as identified in the material. The following section identifies nurses who filled lesser roles or on whom we could obtain only limited information.

Nursing needs to recognize such nurses and acknowledge their individual and collective contributions.

Magaret (“Magee”) Ashworth (later Foreman)
(circa 1922 -)

Margaret Ashworth graduated from St. Eugene’s Hospital School of Nursing in the mid-1940s and following graduation worked in the Lady Elizabeth Bruce Memorial Hospital in Invermere. Shortly after she began work, she was diagnosed with active TB and was admitted to Willow Chest Centre for several months, then sent home to Invermere to convalesce. During her convalescence she was allowed to use her active hours to perform X-rays and lab duties at the hospital.

When recovered, she returned to Vancouver to work the Jericho Beach military hospital, which was used for servicemen with TB. After three months in charge of night shift, she needed to be re-admitted to Willow Chest as a patient where she was treated with pneumothorax and a phrenic crush. Following the surgery, she went back home to Invermere to recover.

After recovery, her nursing career resumed when she became a staff nurse at the Willow Chest Centre. Three years later, she married Ralph Foreman and obtained a nursing position at St. Paul’s Hospital in Vancouver. The couple then moved to California, where she worked for the next seven years as a nurse-anaesthetist with an oral surgeon. Ralph died in 1962 and Margaret became supervisor at the 300-bed St. Joseph's Hospital in Orange County until 1981. While she was in California, she was diagnosed with a tubercular kidney and came to Vancouver for surgery. In the early 1980s, she returned to Canada and settled in Victoria where she worked at the Oak Bay Pavilion until 1987 and retirement at age 65.

In 1992, she moved back to Invermere where she became a volunteer for Meals on Wheels.

Photograph: No photograph available. Kamloops Archives checked.

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Blanche Bibby
(1871 - 1947)

Blanche Bibby was the ninth matron at Tranquille, and one of the longest serving; she was matron from 1926 to 1937. She had previously been on staff at Tranquille for four years and had served with the Canadian forces in France for three years during World War I. When she was appointed, a note in the *Tranquillian* reported she had "long experience of general and tuberculosis nursing in Canada ... [and] is familiar with sanatorium methods in the United States Prior to her returning to Tranquille, Miss Bibby was on the nursing staff of the Arroyo Sanatorium in California." (The Arroyo San was in Simi Valley region, which was climatically similar to Tranquille, but warmer, and had a long history as a private TB hospital.)

She was born in 1871, probably in England. She graduated in 1901 from the St. Pancras Hospital, Highgate, London, England. She also held a certificate for fever nursing.

In conjunction with Dr. Lapp, Miss Bibby introduced a two-month affiliation course for student nurses; hospitals in the Lower Mainland as well as Kelowna, Cranbrook, Nelson, and Prince Rupert all sent students.

In 1933, Miss Bibby wrote an article for *The Canadian Nurse* in which she described the two-month affiliation for various B.C. nursing schools, which began in 1931. The affiliation program accepted about 9 to 13 students, usually from third year.

She died May 8, 1947 in Vancouver at age 76.

Photograph: No photograph available. Kamloops Archives checked.

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Elizabeth Gertrude Breeze
(1881 - 1938)



Elizabeth Breeze was not a "TB Nurse" *per se*, but her involvement with "school nursing" and early public health nursing in B.C. would have involved her in case finding, health teaching, and follow-up with families. She thus is included in this biographical dictionary of TB Nurses.

A graduate of the Hospital for Sick Children, Toronto, "with training in affiliated schools in New York" and post-graduate training at Roosevelt Hospital, New York City, Elizabeth Breeze was hired in 1910 by the Vancouver School Board to initiate a school nursing service in Vancouver. At first she was the only school nurse, but by 1915, there were five school nurses in Vancouver and by 1921 there were eight nurses on staff; she is referred to variously as "supervisor" or "director.

In 1923, she took a summer course (certificate) in public health nursing granted by the University of California, Berkeley. She received a diploma in public health nursing from the University of California in 1927. In the fall of 1936, she was transferred into the newly-formed Metropolitan Health Committee of Greater Vancouver as its director, a position she held until her death April 19, 1938.

She was active in nursing politics throughout her career. In 1912, she was one of the charter members of the Graduate Nurses Association of B.C. At the founding meeting in New Westminster on Sept. 10, 1912, she was elected Secretary-Treasurer, and served continuously on the executive and was president 1921-1925. She was active in the lobby with the provincial government to obtain registration legislation, and became registered as soon as the Act was passed in 1918. She was also active in the Vancouver Graduate Nurses' Association as well as in various public health societies. In 1922, she was nominated for, although not elected, second vice-president of Canadian National Association of Trained Nurses (later the Canadian Nurses Association). In 1923, she was elected president of the Public Health Nursing Section of the Canadian National Association of Trained Nurses and in 1924 was vice-chair of the section.

Elizabeth Breeze was anxious to involve teachers in promoting the health of children. In 1925, she began teaching a class at the University of B.C.'s Summer School for Teachers, part of the Department of Education's "Hygiene and the Child Health Programme." She was co-author, with J. Mace Andress, of a textbook used for many years in B.C. high schools (and possibly in other provinces, as well). The book, *Health Essentials for Canadian Schools*, was part of the "Canadian Hygiene Series."

Photograph: The photograph used here was obtained from the CRNBC Presidential Portraits book, CRNBC Archives.

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Helen Winnifred Connor (later Mrs. L.M. Findlay)

(Occasionally spelled Conner/ and occasionally spelled Findley)

(1902 - Oct. 25, 1973)

Records about Helen Connor are sketchy. According to "notes" in *The Canadian Nurse*, she was a graduate of the Vancouver General Hospital (1923) and she accepted a position in 1926 on the staff of the Rotary Clinic in Vancouver. In 1937, she received her Certificate in Public Health Nursing from the University of British Columbia School of Nursing.

In 1935, she was appointed the second matron of the Vancouver Preventorium, which had opened in 1931. She may have been on staff earlier under Dorothea MacDermot [q.v.]. She remained on staff until at least sometime in 1938 and may have remained as matron until Rona Walker was appointed. She later married and was active in the VGH Alumnae and was president of that group in 1943-1944 (VGH, 1974).

Photograph: No photograph available. EW checked VGH records.

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GZ checked CRNBC records (1 March 2004) – nothing available

EW checked VGH grad records and photos – nil available

Gladys M. Currie

(circa 1892 - January 13, 1970)

Gladys Currie graduated from Vancouver General Hospital in 1913. Nothing could be found about her early career, but in May 1920, she was appointed the nurse in charge of a newly-restored North Vancouver Hospital.

She became Matron at Tranquille in 1937 and served in that position until 1946 (see Table A). She was appointed at the same time as a new medical superintendent in a smooth transition. Under her administration, and thanks to the pressures resulting from war-time, working conditions and salaries for the 30 graduate nurses at Tranquille improved enormously. Nursing staff finally were permitted to live away from the hospital, they finally achieved the 48-hour work week that had been granted other staff much earlier, and nursing salaries were raised to become the highest in the province. (This largely was because of the need to retain staff in such an isolated area.) The Tuberculosis Division established its own affiliation course and the one at Tranquille was discontinued in 1943, but the loss of the 12 affiliation students was keenly felt. Staff quarters continued to need improvement, however. During the early 1940s, Tranquille had 350 patients, between 30 and 40 graduate nurses, and many other staff and had made significant strides to becoming, as Norton (1999) calls it “a whole little city by itself.”

Although she was only about 54 years old at the time she left Tranquille, we could find no further information about a continued career in B.C. However, B.C. death records show that a Gladys Margaret Currie, survived only by an aunt, died January 13, 1970 at age 78.

Photograph: No photograph available. EW checked VGH records, only a group photo for 1913.

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Personal Communication from Esther Paulson to EW and GZ relative to this woman. EP knew

her and was able to supply her first name; she also reported that Currie was the Matron at the North Vancouver Hospital prior to her appointment at Tranquille; this led to a search of information on the North Vancouver hospitals (see Carswell).

Registration Records, Registered Nurses Association of B.C. Information from CRNBC, March 11, 2004. (Place and date of graduation.)

Ethel M. Elliott
(c1887 - c1987)

Ethel M. Elliott was a nurse at the Rotary Clinic (dates not known, but could have been hired when the Clinic opened in 1919). In 1922, Elliott, a 1917 VGH graduate, became nurse-in-charge, and in 1924, she changed positions with Margaret Thatcher (q.v.) and became the visiting nurse. She also worked with Jo Peters (q.v.). The visiting nurses called upon newly diagnosed cases, gave instructions about isolation precautions and taught proper isolation technique, arranged for examination of contacts, visited known cases, and, where necessary, gave personal care or taught family members to do so. At the Clinic, they had many other duties, such as admitting patients, taking histories, doing X-rays, developing plates, doing lab work, handing out medications, teaching proper isolation techniques, arranging for examination of contacts, visiting already known cases, and supervising lunches for 38 children and 15 ex-patients (Hatfield, n.d., Vol. 1: 64).

There were no social workers, so the nurses worked in cooperation with the City Health officer and with Children's Aid to arrange for social assistance or relief and helped find foster homes (Hatfield, n.d., Part 1, p. 64).

In 1932, Ethel Elliott completed her nursing degree at the University of British Columbia. In 1933, Vancouver's medical health officer created a tuberculosis division in the city's health department and she was appointed nurse in charge. She supervised the 10 field nurses; there were also 2 clinic nurses (Hatfield, n.d., Part 2, p. 3).

In 1936, when the unique new Metropolitan Health Services in Vancouver were established, Elliott was appointed TB nursing supervisor. She remained there until her retirement in the mid-1940s. She died in her 99th year (VGH, 1988).

Photograph: None found

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Florence (“Babs”) M. Erickson

(1895 - Oct. 12, 1983)

Florence Erickson graduated from St. Luke's Hospital in Spokane, Washington in 1921. She got her initial registration in B.C. in 1926, then obtained a Certificate in public health nursing from the University of British Columbia in 1927.

In 1928, she is mentioned in *The Canadian Nurse* as having resigned from VON to join the staff of the Rotary Clinic. In 1933, when the TB Division of the City Health Department was established, she is mentioned as one of the 10 nurses on the field staff under Ethel Elliott (q.v.). (Hatfield, n.d., Part 1).

In 1937, Florence Erickson replaced Jo Peters (q.v.) as the Travelling Clinic Nurse for the Division of TB Control ([B.C.] Provincial Board of Health, 1937, 1943).

Photograph: No photograph available.

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Mary Ferguson (later Mrs. M. J. Whitecross)
(c1879 - 1963)

The list of matrons at Tranquille in the Kamloops Archives (Appendix A) identifies Mary Ferguson as holding the position from 1917 to 1919. However, in Tranquille's 12th annual report (1918), the Matron is identified as Mrs. M. J. Whitecross; she had married patient Alexander Whitecross, who had taken on the job as secretary for the institution. The 1919 report noted that Mrs. Whitecross resigned in September 1919 after two years as matron.

Norton (1999) notes that Mary Ferguson was hired at a salary of \$65 a month, higher than the previous matron; the starting salaries of her nursing staff were also increased, first to \$45 a month and the following year to \$55 a month, because the hospital was having difficulty finding nurses. Mary Ferguson continued to have difficulties with discipline of soldier patients; Dr. Voorman, the medical director at Tranquille, supported her efforts, but a military medical officer, asked to investigate, reported her attitude was not satisfactory and recommended changes in her methods.

In the 1920s, Tranquille had a number of married nurses on its staff; this is contrary to "common knowledge" about the period, which indicates that most hospitals did not allow married nurses. Some of these nurses married while working at Tranquille, either physicians or other staff or, in some instances, patients. Many of these married nurses lived in housing at Tranquille. As another example, a Mrs. McCabe was a member of the nursing staff for three years when she resigned to take up residence in Kamloops where her husband was on the staff of the provincial police. We also noted that there was a school – "the Little Red Schoolhouse" – on the site for the support staff, so that perhaps some of these nurses had children.

The May 1921 issue of *The Tranquillian* (2(10), 8) contained a picture of a baby -- "Margaret Elizabeth (Betty) Whitecross, age 12 months, youngest resident of Tranquille, daughter of Alexander Whitecross, Esq., oldest resident of Tranquille – having come here as a patient in 1910 [sic]." The December 1921 issue (3(5), 1) notes that Alexander Whitecross was admitted as a patient in 1908 [sic] and was a patient for six years under "the strictest observance of 'cure' rules." Following recovery, he joined the staff, first as secretary and, when the province took over, as bursar. (At that time, all office staff were ex-patients.) In 1929, when a new Conservative government was elected in Victoria, he was dismissed because of his well-known Liberal connections.

A B.C. death notice for a Mary Janet Whitecross was found showing that she died on December 23, 1963 in West Vancouver at age 84.

Photograph: No photograph available.

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Miss A. Gillis
(dates unknown)

In July 1912, the Vancouver Girls' Auxiliary of the Anti-Tuberculosis League advertised for "a capable and well-trained nurse ... to combat consumption," and to do home visiting and teaching (Hatfield, n.d., Part I, p. 33). The nurse hired, part-time, to the position was a Miss A. Gillis, reportedly a graduate of Boston City Hospital, although we were not able to identify her in the list of Boston City Hospital graduates. She had considerable experience in district nursing in New York's East Side. She drew up a 10-point job description (see Table A) that included the revolutionary idea of regular follow-up visits for all patients discharged from hospitals or sanatoriums (Hatfield, n.d., Part I, pp. 39-40). Her work was "affiliated" in Vancouver with the Medical Health Department (Hatfield, n.d., Part I, p. 38). She was faced with what was called "the congested cabin tenements" of the east end of the City.

In 1913, she presented a paper on "The Tubercular Situation in Vancouver" at the annual meeting of the Graduate Nurses' Association of B.C.; this was published in *The Canadian Nurse*. In the paper, she said there were "hundreds of advanced cases of tuberculosis in Vancouver alone, half of which were not reported" (p. 517). She recommended "segregation of cases occurring in lodging houses, dormitory missions, tenements, and construction camps would be a tremendous step toward the prevention of tuberculosis" (p. 517). She also mentioned the need to train those who work in unsafe surroundings about ways to prevent them from contracting the disease. She mentions the "housing problem" in Vancouver. She said "the only preventive work at present being carried out in the city was by the Anti-Tuberculosis Society Auxiliary" (p. 517).

Photograph: No photograph available.

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Boston City Hospital List of Graduates

**Table A: Ten Points Program to Reduce TB in Vancouver,
by A. Gillis, 1913**

1. To enforce strictly the law relating to expectoration in public conveyances, places, and streets. Placards of warning to this effect printed in English, Italian, Chinese, and Japanese, to be displayed in prominent positions in all public conveyances, buildings and places.
2. To establish a tuberculosis clinic apart from the free dispensary, which should be open at fixed hours every day, having one physician in charge of treatments and records.
3. A municipal hospital in Vancouver for advanced cases of tuberculosis.
4. The institution of compulsory teaching in public schools of the means of prevention of tuberculosis (by exhibits).
5. That the bylaw relating to notifiable disease be strictly enforced, more especially as regards tuberculosis.
6. The education of the community as to preventive measures or – in other words – an educational centre from which a continuous campaign could be conducted.
7. That it be understood that return cases from either hospitals or sanatoriums be followed up by the visiting nurse.
8. That a systematic course of instruction be given by the visiting nurse in each new case.
9. That comprehensive literature be left with each new case or family.
10. That continuous ventilation should be enforced in public schools, conveyances, churches and all public buildings.

Isabelle Maud Hill
(1871 - 1936)



Isabelle Maud Hill was born in Hillsborough, Ontario, in 1871, and was a graduate (1900) of the Hamilton General Hospital. She took the training program for the two-year-old Victorian Order of Nurses in 1901. She then was appointed by the Order as the first VON nurse in Vancouver. In 1904, she was employed by the Vancouver Anti-Tuberculosis Association, possibly through the VON; the Society may have paid the VON to have her assist in case-finding and home care of TB patients.

She was hired in 1905 by the Britannia Mining Company, Howe Sound, to provide care for its miners and their families and this was followed by a period of private nursing both in Vancouver and in northern Washington state. In 1910-1911, she ran a private hospital in New Westminster, but her health deteriorated and she had to take leave in California. After her return to B.C., she was hired again by the Vancouver Anti-TB Association and also did some work for the Vancouver City Health Department under the new medical health officer, Dr. Fred Underhill; again it is possible that much of this work would have involved TB case-finding, care, and follow-up.

In April 1914, she was the nurse at a new free clinic established by the Vancouver Association for the Prevention and Relief of Tuberculosis in the main city centre area (near Cambie and Pender). The clinic was open for only one hour on Wednesdays, but Miss Hill did follow-up home visits and case-finding in the city. It is interesting to know that her brother, Dr. Herbert Winslow Hill, was at this time head of the Department of Bacteriology at the University of British Columbia. Dr. Hill was instrumental in the establishment of the UBC School of Nursing in 1919, which, although headed by Director Ethel Johns, was under his department's administrative control.

Miss Hill is mentioned as having been involved in the establishment of the Shaughnessy Military Hospital for the returning soldiers of World War I – many of whom were victims of TB. From 1918 to 1928, she worked in eastern Canada and the U.S.A. (chiefly in Georgia). In 1929, she returned to New Westminster to the private hospital she had established and died there in February 1936.

Photograph: The photograph is from the City of Vancouver Archives, Photo #: Port.P1052, N5334. Permission must be obtained for use other than research purposes

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Faith Flora Hodgson
(1915 - 1983)



Faith Flora Hodgson was born in Port Alberni and graduated from UBC with a BA in 1936. She received her nursing diploma from the Royal Jubilee Hospital School of Nursing in January 1941. Following a brief experience as staff nurse at the Queen Alexandra Solarium for Crippled Children, Mill Bay, B.C., she joined the Royal Canadian Naval Nursing Service in 1942, and served overseas for 15 months. In addition to her service in Canada, she was with *HMCS Niobe* in Scotland.

When she left the service, she enrolled in the course in hospital administration at the McGill School for Graduate Nurses. From 1946-48, she held the position of assistant superintendent of nurses at the Trail-Tadanac (B.C.) Hospital. In 1948, she was named the superintendent of nurses of the sanatorium at Tranquille; she was the first there to hold the title Director of Nursing. She left Tranquille in 1950. She then held administrative posts in a number of B.C. hospitals and was assistant supervisor, Vancouver Unit, Division of TB control, prior to becoming a public health nurse on Vancouver Island in 1954.

She joined the World Health Organization service in 1960 and was a public health nurse advisor and educator at the ministry of health level in Kenya for five years and in Turkey for three years. Her last posting was in Lesotho, Africa, until 1970, when she returned to live in Victoria. She died on March 20, 1983 in Victoria.

Photograph: The photograph used here was used in the *RNABC News*, February-March 1971, p. 22.

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Jean Matheson
(1874 - 1938)



Jean Matheson was the first "Lady Superintendent" of the Tranquille Sanatorium, Kamloops, B.C. She was appointed October 31, 1907 at a salary of \$60 a month (Hatfield, n.d., I, p. 15, 17). Before she went to Tranquille, she was matron of the Royal Inland Hospital in Kamloops, appointed there in 1901. A graduate of Winnipeg General Hospital, she may have come from a family in the Qu'Appelle district, where there was a TB Sanatorium; little is known yet about her family.

During her time at Tranquille, she served first with Dr. Robert Washington Irving until 1910. She survived a bitter dispute with his short-lived successor, Dr. J.J. Thompson, who charged her with insubordination. The Board investigated and eventually expressed its full support for Miss Matheson. Dr.

D.W. Davis took over as interim until Dr. Charles Harvey Voorman was appointed in late 1910.

Miss Matheson resigned from Tranquille, effective December 31, 1911, and returned to Qu'Appelle for a period, after which she returned to B.C. to become matron of the Queen Victoria Hospital, Revelstoke; she opened a school of nursing there in 1914. In 1915, she was head of the contingent of B.C. nurses who had volunteered to go overseas in World War I and was Matron of the 5th Canadian General Hospital at Salonika, Greece. For her services, she was awarded the Mons Medal, the Victory Medal, the Royal Red Cross Medal, and the King George Jubilee Medal.

After the War, in 1919, she was appointed Matron of Shaughnessy Military Hospital in Vancouver, a position she held until 1938. This hospital was established to take soldiers returning from the War, many of whom were suffering from TB. She served as president of the Overseas Nursing Sisters Association from 1936-1937. Miss Matheson died April 22, 1938, in Winnipeg. Funeral services were held in both Vancouver and Winnipeg, although, interestingly, her obituary in the *Kamloops Sentinel*, made no mention of her work at Tranquille. The Jean Matheson Pavilion at Shaughnessy Hospital was named for her when this new pavilion, mainly for TB cases, opened in 1946 following World War II.

Photographs: This photocopy was taken from an original in the Kamloops Archives. The photograph is #388 and permission must be obtained from the Kamloops Archives for its reproduction. A large painting of Jean Matheson was made for the Jean Matheson Pavilion, which now is closed; this portrait hangs now in the George Darby Pavilion, Burnaby, B.C.

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Isabel G. McVicar (later Mrs. Morgan)
(1896 - after 1943)

Isabel McVicar (occasionally spelled MacVicar) was one of the active TB nurses of the late 1930s. Born in B.C. in 1896, she graduated from the Vancouver General Hospital in 1919 and was registered as a nurse in B.C. in 1920.



She specialized in surgical nursing, and spent two years at the Sacramento Hospital in California, before she joined the staff at the Royal Inland Hospital in Kamloops. There, she assisted Dr. J.S. Burris at the first thoracoplasty operation carried out in B.C.; Royal Inland performed major surgery on patients from Tranquille. She joined the staff at the Rotary Clinic in Vancouver, then later was nurse in charge of the Chest Clinic at the Vancouver General Hospital. She received a Certificate in Public Health Nursing from the University of B.C. in 1939.

She was hired in 1938 by the B.C. TB Society as the nurse to cover the New Westminster district, which included the Lower Fraser Valley. She was responsible for implementing a year-long, highly successful pilot project for the Society to introduce tuberculin testing for children. After a period of intense public relations in the district, she had permissions from 95 per cent of the parents and oversaw the tuberculin skin-testing of 8,000 school children, of which 375 were found to be positive reactors. The January 30, 1939, minutes of the Society quote a letter from her reporting on her activities in the pilot project, and the Board commented on the valuable work she had done. The Society decided to renew her contract for another year (to March 31, 1940), but also to approach the municipal governments to take over the service. Later minutes show that her contract was also renewed on a monthly basis in the next year as the provincial health officer (Dr. Amyot) looked into the hiring of more generalized nurses in his Public Health department.

In 1939-40, she expanded her work to West Vancouver and Powell River area as well as New Westminster and the Lower Mainland. She made 3,144 calls and aided in admitting 41 patients to hospital. The minutes note that she "has continued her activities in the Lower Fraser Valley and has extended her efforts to Agassiz, Gibson's Landing, Roberts Creek and Sechelt. Her main work continues to be in the Lower Fraser Valley" (p. 2). The Society wanted the municipalities to take over the services, but this had not been accomplished. "We have done a great deal in our tuberculosis work by putting in a specialized nurse who will concentrate on tuberculosis cases in that area" (pp. 2-3). The society assisted in financing another field nurse in other parts of the province. McVicar's salary for 1940-41 was \$1,500 with a travelling expense account of \$1,000.

In the 1941-42 report, it is noted that she had married and was Mrs. Isabel G. Morgan. She continued to work, with the TB Society urging the municipalities to take over this responsibility. New Westminster was making a contribution toward the expense of the nurse (\$150), but "no word had come from Surrey." The minutes indicated that New Westminster did not have a health centre. In the 1942-43 report, it was noted her salary was increased to \$1,620, plus travelling

expenses of \$1,200.

In the 1944-45 report, no nurses' names are listed. It may be that McVicar's position now was taken over by the province or that she had resigned. No further information on her was found. No B.C. death registration was available for her; she may have left the province.

Photograph: Photograph is a copy of one available in *Your Health*, March 1939, Vol. 20, No. 8, pp. 8, 24. (B.C. Lung Association Archives).

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This nurse's job big adventure: B.C. tuberculosis society experiment in Lower Fraser Valley. (1939). *Your Health*, March 1939, Vol. 20, No. 8, pp. 8, 24.

Esther Paulson
(1906 - 2004)



The career of this TB nurse leader effectively illustrates the many changes in care and education for TB nurses. Esther Paulson graduated from Royal Columbian Hospital School of Nursing in 1928 (in a class of 15 students). One of her first assignments as a student was to pick up and clean the dishes from the TB isolation ward – and she received little or no instruction on handling infectious materials until she went home on the weekend and her mother, who had cared for a neighbour with TB, taught her the elements of aseptic technique. She was awarded the Dr. R.E. Walker Memorial Medal for highest marks and also the special prize given by Mrs. Bourke Lea for devotion to duty and class popularity.

When she graduated in 1928, she was offered a job as a graduate in the isolation cottages because she had proved so proficient and knowledgeable about TB care; she took it on, but had to leave because her health was affected. She continued her nursing education, first with a course in obstetrics in Montreal, then took the public health nursing diploma course at UBC, receiving her certificate in 1934. Then, in the midst of the depression, she was offered a post by Laura Holland as a combined PHN and welfare field service officer (under Dr. G.M. Weir, who was minister of health and welfare in B.C.) in the East Kootenay district. Many of her patients had TB and she learned first hand about the financial problems of TB patients in an era that had no health insurance or social security benefits. She then worked in public health in the Vancouver area, but in 1942, again because of her knowledge about TB, was "loaned" to the new Division of TB Control to develop and coordinate services between the Division and its branches and the hospitals, clinics, and local public health services. After one year, she was given a permanent appointment as Director of Nursing of the Division's major TB hospital in Vancouver (the Willow Chest Clinic) and also continued as consultant and coordinator for the Division.

From graduation on, she had taken an active role in nursing politics, and served on many committees. Partly because of her contacts at the Registered Nurses Association of B.C. and her role at the Division, B.C. was the first province to set up a "TB rotation" (through the Division of TB Control) and require all student nurses in the province take it.

With the opening of the affiliation course in 1944, "standards for TB nursing were developed and a broader concept of total nursing care was emphasized" (Paulson & Kunderman, 1956, p. 404). She, Josephine Peters [q.v.], Ferne Trout [q.v.], and others began working on ways to ensure that nurses would be better protected.

In 1947, she was appointed to replace Miss Peters, who was retiring as General Superintendent of Nursing for the Division of TB Control. In May 1950, she was a speaker at the annual meeting of the Canadian Tuberculosis Association on the educational preparation of

students and graduates for TB nursing.



In 1949, she was elected vice-president of the Registered Nurses Association of B.C. and in 1951 she was elected president. Her appointment was welcomed by the Division of TB Control and she received letters of congratulation from George Elliot, B.C.'s Assistant Deputy Minister of Health, and from Dr. G.F. Kincade, Director of the Division of TB Control.

On April 9, 1952, when the new, \$1.8 million, 264-bed Pearson Hospital (named after former B.C. Health Minister George S. Pearson) was opened, Miss Paulson was its superintendent of nurses. Her own notes indicate that the first patients admitted were nine Japanese men from the internment camp hospital in New Denver, B.C., where the Japanese had been interned during WWII; their transfer had been delayed until the hospital opened. The hospital "went to full occupancy immediately from the long list of over 200 applicants." In this new hospital, she is credited with pioneering the self-care theory for TB patients, assisting them to prepare for full return to the community after long hospitalization.

During her life to that point, death rates from TB had dropped from 200 per 100,000 [rate about 1900] to 25 per 100,000 in 1952. Then, as streptomycin, which had dramatically altered care and treatment of TB, led to a further reduction in the needs for TB hospital beds, Miss Paulson helped in the changes to a new role; in 1954, she helped open the new wing of the hospital for rehabilitation of polio patients (the new epidemic).

In 1957, she was one of five Vancouver nurses who went to the International Council of Nurses Congress in Italy; in 1961, she attended the XVIth international TB conference in Toronto. She was speaker in the general session at this conference on the "Self-help units in tuberculosis hospitals."

On June 30, 1966, she retired after 41 years in nursing; at the time, she held the dual appointment of Director of Nursing at Pearson and Director of TB Nursing for the B.C. Department of Health. In 1968, she was awarded an "honorary life membership" in the Canadian Tuberculosis Association. Following retirement, she remained active and interested in nursing; one of her first volunteer projects was "hospitality to foreign students in nursing courses at UBC." As well, she continued to be involved in nursing activities; when she was 90, she was a guest lecturer at the UBC School of Nursing, speaking on osteoporosis. She was an honorary life

member of the B.C. History of Nursing Group and provided valuable counselling and assistance on a number of the B.C. Group's historical research projects. As well, in her early 90s, she wrote two articles, one in Swedish for a historical paper published in Sweden and one about her early nursing experiences for the *B.C. Historical News*. She also prepared an unpublished paper on history of TB nursing in B.C. and an unpublished paper on the history of the Royal Columbian Hospital; both are in the B.C. History of Nursing Group Archival Collection.

Her health began to deteriorate in 2002. She died January 2, 2004, after a brief illness.

Photographs: The two photographs are from the Esther Paulson Fonds at the B.C. History of Nursing Archives and were provided by Esther Paulson. Both are circa 1950s.

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Josephine (Jo) Peters
(1889 - Sept. 14, 1953)

Josephine (Jo) Belle Peters was the first "visiting nurse" at the Rotary Clinic in 1919 and she stayed at least until 1922. In 1924, she was appointed by the Christmas Seal organization to



work with Dr. A.S. Lamb, the travelling medical officer, and thus assisted with the initiation of the travelling clinics and the establishment of a central registry for TB cases. (There is discrepancy between information in Green [1984] and Hatfield [n.d.] as to dates; Hatfield states that she was at the Rotary Clinic as a PHN until 1928, but Green gives the 1924 date, which appears to be more accurate.)

At any rate, the Tranquille Tuberculosis Society, using funds from the Christmas Seal campaign, purchased a portable x-ray. The purpose was to visit smaller centres to find and diagnose TB as early as possible. Peters spent a month at Tranquille getting acquainted with patients and their needs and looking for possible contacts for early case-finding. When the travelling clinics first began, they were held in local hospitals and follow-up was done by the local public health nurses.

The travelling nurse took histories, set up appointments for examinations and for x-rays and wrote up reports. Clinics were held all over BC with exception of Vancouver, where the Rotary Clinic carried out this work. Notices were put into the local papers about the coming clinic; examinations were free. All student nurses in the hospitals were x-rayed and as many graduates as possible. For example, total examinations for the early years (April to March each year) were as follows:

1928-29: 991	1930-31: 2,323
1929-30: 1,779	1931-32: 2,950

The central registry established by Dr. Lamb and Miss Peters apparently formed the basis for collection of data on communicable diseases that later became a prototype for all of Canada.

Peters' TB work eventually was funded through Special Services in the B.C. Health Department, and she was eventually head of this service. She was made Supervisor of Tuberculosis Nursing under the Provincial Board of Health in 1937 as more nurses were added to the travelling clinics. She retired in 1948 (Green, 1984, pp. 32, 166).

Jo Peters was born in Saskatchewan in 1889 and graduated from the Vancouver General Hospital in 1916 and was in the first certificate course for public health nurses offered by the University of British Columbia, receiving her diploma in 1921. In 1923, she was elected the first president of the UBC Nurses' Alumni Association. In 1925 she was convenor of the Public Health Nurses Group of Greater Vancouver. She died in Nanaimo in 1952 at age 63.

Photograph: This head and shoulders copy was taken from a photograph in Green and enlarged. It shows Miss Peters in 1949 (following her retirement).

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Mary Rowles
(1907 - after 1957)



Mary Rowles became the 14th matron at Tranquille, appointed in 1950 and serving until August 1957. During her time there, she was plagued by nursing shortages, which, combined with the isolation of the hospital, made keeping staff difficult. Hours per week dropped from 44 (introduced in 1947) to 40. Nursing care changed; there was a full-time surgeon on staff, and many more patients were treated surgically. As well, chronic patients increased because anti-TB drug treatments had reduced the need for hospitalization of new cases. During these years, several other TB units had closed and their patients were transferred to the Willow Chest Clinic or Pearson, and plans were laid for the closure of the TB hospital at Tranquille. Mary Rowles resigned in August 1957 to become director of nurses at the Royal Inland Hospital in Kamloops. She likely remained at RIH until the hospital expansion in 1966.

Mary Rowles was born in 1907 in England, but graduated from a school of nursing in Alberta in 1929. Little is known about her early career, but she became registered in B.C. in 1948. No B.C. Death Registration was found for her.

Photograph: The photograph of her, taken about 1957, is available in Scott, 1974, in Chapter 7 (unpaginated).

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(Also Checked UBC records and for Death Certificate September 8, 2004, with no further information)

Margaret (“Meg”) Allen Thatcher
(1892 - 1987)

Margaret Thatcher was one of the pioneer staff at Vancouver’s Rotary Clinic in the 1920s. From 1938 until her retirement in 1952, she worked with the Division of Tuberculosis Control as the nurse in charge of the Chest Clinic at the Willow Chest Centre.

She was born in England in 1892 and came to Canada and to B.C. with her family in 1907; her father was an Anglican clergyman. She attended the University of Alberta, then entered the School of Nursing at Kootenay Lake General Hospital in Nelson, B.C., graduating in 1922. She also took the second Public Health Diploma Course offered by the University of B.C. School of Nursing, obtaining her certificate in 1922. After a brief stint in the Peace River District, she joined the staff of the Rotary Clinic in Vancouver.

When her father became ill, she returned to the Columbia Valley area to help care for him. About this time, a child welfare worker asked her to care for infant twin boys because their single-parent mother was ill with TB and the infants were TB contacts, malnourished, and needing special care. Although it was unusual for a single woman, she eventually adopted and raised them.

She, her mother, and the boys moved back to Vancouver in 1938, and because of her experience with TB patients, she was asked to join the staff of the Chest Clinic. She was the charge nurse from 1944 to 1952. After retirement, she lived near Gibson’s, B.C. She died in 1987.

Photograph: No photograph found.

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Christina West Thom
(1882 - November 9, 1940)

Christina West Thom graduated from the Winnipeg General Hospital on February 15, 1909; she had entered in February 1906, but was off ill on two occasions with diphtheria and measles. After she graduated, she left Winnipeg to join her brother, a physician in Trail, B.C. (Crossin, 2004).



In 1912, she was Lady Superintendent of the Trail hospital. About late 1916 or early 1917, she was employed as a city nurse in Victoria. According to Hatfield (n.d., Part I), she was the first full-time visiting city nurse in Victoria to devote herself entirely to TB. By 1918, she was being paid by the Victoria District Anti-TB Society (Annual Report TB Societies, 1918). (There needs to be more searching in Victoria records related to this part of her career.) She provided an excellent report on her service,

which was published with the 1918 annual report of the B.C. Society and included in the Canadian Association for the Prevention of Tuberculosis *Annual Report* for 1918; this included a "statement of receipts and expenditures" that is highly illuminating.

She took the first Public Health Nursing certificate course offered by the University of British Columbia, graduating in 1921 (Zilm & Warbinek, 1994; UBC SoN records). In 1921, she was hired by the Canadian Red Cross Kamloops Branch (an outgrowth of the war-time Junior Red Cross Auxiliary) -- with the city to pay half her salary, which was \$166.72 -- as a public health nurse. Her job was to ensure that visits to soldiers injured or afflicted with TB would continue and that she would carry on with the anti-TB fight among the civilian population, start a child health and welfare program, and look after public health matters for the city. In May 1921 she launched a well-baby clinic. Later, Thom offered classes in home nursing and hygiene at the high school for teenage girls and adults. Thom also visited the schools, measuring and weighing each pupil at the end of each summer term. In 1922, she did more than 6,800 examinations of school children. She stayed in Kamloops until May 1923. (Cross, 1991 for all above.) [Check Kamloops Historical Records and Kamloops Archives for more.]

In about 1924, she began relieving on the staff of the Bureau of Child Hygiene, Winnipeg, and may have stayed there for some time. In 1937, her address was care of her brother in Trail. She died in November 1940 in Vancouver (B.C. Archives/ Deaths).

Photograph: Photograph showing Thom in the new Well-Baby Clinic was copied from a photocopy of a newspaper item (see Cross, 1991), and the line was caused by a fold in the paper. Photograph may be from Kamloops Archives (i.e., it is marked # 1724).

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GZ checked Green and Pearson and found no mention of Thom. GZ checked tables of contents of the B.C. *Public Health Nurses Bulletin* and found no article by Thom.

Mary Thomas
(1879 - after 1920)

Miss Mary Thomas was the fourth matron at Tranquille, from early 1913 to 1917. Norton (1999) reports that she was hired early in 1913 at a salary of \$60 a month (p. 80). She is mentioned briefly in the TB Society's Annual Reports for the years 1914 and 1915. Although references to nursing staff are few, it would appear that she had a complement of about seven nurses for 88 patients when the new Sleeping Pavilion was opened; in addition, there were cooks, kitchen help, and "female orderlies" (Norton, 1999, pp. 79-80). The sleeping quarters for staff, in the Main Pavilion, had room for only 16. Perhaps indicative of the hard work of the period, two of the nurses developed pulmonary TB in 1913 (Minutes, AGM, Mar. 18, 1914 cited in Norton, 1999, p. 80).

She was matron for the beginning years of World War I, and, during the War, Tranquille, like most other TB hospitals in Canada, was soon inundated by convalescent Canadian soldiers returned from Europe with TB. The first two soldiers arrived in late 1915 (Norton, 1999, p. 89) and 32 beds were soon earmarked for military patients, which were paid for by the federal Military Hospitals Commission. Originally it was intended that Tranquille should take 70 patients, but by the end of the war, the patient population was 120. (See also Norton for more information on the difficulties of caring for convalescent soldiers, who protested about the care, the food, and the requirements to assist with the routine work that was required of non-paying patients.)

Mary Thomas was born in Wales in 1879 and took her nursing education in Denver, Colorado, graduating in 1903. Although she had worked in B.C. earlier, she did not become registered in the province until 1920. Matron Thomas joined the Queen Alexandra Imperial Nursing Service and went overseas in the spring of 1917. She was replaced by Mary Ferguson [q.v.]. No information on her later career could be obtained.

Photograph: No photograph available.

References

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Norton, Wayne. (1999). *A whole little city by itself: Tranquille and tuberculosis*. Kamloops: Plateau Press.

Death registrations were checked, and death notices for two Mary Thomases were found, but there was not enough information to determine if these were her or if she died elsewhere.

M. Ferne Trout

(Feb. 13, 1919 - March 23, 2006)



Ferne Trout was appointed instructor for the TB affiliation course started by the B.C. Division of TB Control in 1944. She had graduated from Vancouver General in 1942 and returned to the University of British Columbia to complete her degree. Unfortunately, she was diagnosed with TB herself and spent a year as a patient at Tranquille, during which time she had a pneumothorax. She then completed her degree, obtaining her Bachelor of Applied Science in Nursing, and was offered a position with the Division of TB Control teaching in the first course in Canada that was mandatory for all student nurses. (See also **Esther Paulson** and **Jo Peters**.) She wrote an article describing this course that was published in the national nursing journal.

Her job as an instructor lasted until 1946 after which she was a head nurse with the Division, working on a male Veteran's ward of 63 TB patients. She then was appointed Assistant Director of Nursing with the Division of TB Control (1947-1948). Following this, she had a number of positions in various parts of Canada and throughout the province, including a one-year stint as a travelling instructor for the Registered Nurses Association of B.C.; this was an early continuing education course designed to help nurses keep current on advances in nursing.

In 1952-1954, she was Assistant Director of Nursing (to **Esther Paulson** [q.v.]) at the new Pearson Hospital, which had been opened to care for the influx of TB patients following World War II.

After this stint with tuberculosis patients, she once again moved through a variety of senior position, including Director of Nursing Education at Royal Inland Hospital in Kamloops and Director of Nursing at Penticton Regional Hospital and later at Lions Gate Hospital in North Vancouver. She had taken the one-year special course offered by the University of Toronto in Hospital Administration in 1964. Following her time at Lions Gate, she was appointed a surveyor and later associate executive director for the Canadian Council on Hospital Accreditation (CCHA). The Council set standards for and accredited hospitals all across Canada. She later wrote that "the Council was the greatest challenge of her career and that she was given opportunities to use her organization, planning, and writing skills. Her next career move was as Director of Patient Services at Shaughnessy Hospital in Vancouver from 1978 to 1980 and her final career move was as Director of Special Projects at the Vancouver General Hospital from 1980-1983.

She retired in 1983 first to Penticton and later to Kelowna, and, despite health problems, continued to lead an active life working on her memoirs. She died peacefully in Kelowna on March 24, 2006, age 87 years.

Photograph: Photograph, circa 1966, from Biographical Files, CRNBC Library.

References

Most of this information is from the B.C. History of Nursing Group's biographical files. Miss Trout has written a brief autobiography and several memoirs of her working years, including one that gives some description of her work in TB care.

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Nursing Profiles: Ferne Trout. (1973). *The Canadian Nurse*, 69 (10), 26.

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III. OTHER TB NURSES

This section of the *Dictionary* identifies 60 additional nurses who made contributions to TB care, prevention, and control in B.C. but on whom we were able to obtain only limited information. However, the names of these nurses needs to be recorded and their contributions recognized. This database is by no means a complete list, and must be considered a work in progress. We hope others also will be able to add information.

See also Appendices A to F, which contain lists of nurses who worked in TB facilities. For these nurses, we were not able to find any information other than the name.

The dates given following the name refer to the years for which we found information about the nurse.

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Irene Anderson (later Smith) (circa 1940s) – In spring of 1942, Irene Anderson, age about 25, was recruited by the B.C. Securities Commission to administer two hospital units at the Hastings Park Camp for Japanese who were being interred because of a perceived threat to national security during World War II. Previously she had five years experience in supervisory and teaching positions in the B.C. Mental Health Services at Essondale. She was expected to administer the Internment hospital units, one of which was for TB patients, and to keep records, supervise patient care, supervise staff, and train aides to supplement the professional nursing staff. Irene Anderson grew up in Kamloops, but we have not identified her nursing education program. (She was not a VGH graduate, but may have graduated from Royal Inland Hospital.) After she left the internment camp, she graduated from the Teaching and Supervision Certificate Course offered at the University of British Columbia School of Nursing. After she graduated, she moved to Victoria and married Howard (“Howie”) Smith (Source: Smith, 1977). It was not possible to find a death notice based on the information we had. A photograph of Anderson and 6 Japanese women is shown with the information on the Hastings Park Internment camp in Section I.

Doris Bullock (circa late 1920s) – A 1922 graduate of the Vancouver General Hospital, she was appointed to the Rotary Clinic Staff in 1931 (*TCN*, 1931, 27 (6), 321).

Gertrude Blackford (circa 1909 - 1920s?). Miss Blackford worked at Tranquille as early as 1909, then left to assist Dr. Irving to run his private clinics in Kamloops (first, the Riverside Cottage Sanatorium and, later, the Sunny View Sanatorium). She likely remained with him until these closed in the early 1920s (Norton, 1999, p. 134). [Check Kamloops Archives.]

Alice V. Bush (c1948 - 1969) – Miss Bush was matron at the Coqualeetza TB Hospital in 1948 when a major fire destroyed one building. She is mentioned in a number of news clippings at the time. She remained as director of nursing until the hospital closed in 1969, but little other information could be found. A photograph is available in her BCHNS biographical file.

Janet Campbell (c1971) – Is mentioned in a report by the Committee on Public Health Nursing of the C.N.A. (1917) as working as “a public health visitor” in Vancouver and her duties were to visit and inspect the sanitary conditions of all stores, factories, and public buildings where female help is employed; also to see that the employees are free from any visible skin eruption; to inquire into conditions of labor, as to hours and character of work; to inspect sanitary conveniences for women at the various parks and bathing beaches; to act as Infant Protection visitor;”

Mrs. Clark (c1907) – Norton (1999) reports that Mrs. Clark was the first nurse to be hired on the staff of Tranquille Sanatorium. She arrived in Kamloops by train with seven patients who were being transferred from Vancouver; they were joined by three other patients from Kamloops and proceeded to Tranquille. Mrs. Clark had been with the Victorian Order of Nurses in Vancouver. (No refs. to Mrs. Clark in Gibbon, 1947 [VON Book])

Evelyn Connolly (1959) – Miss Connolly was mentioned by Norton (1999) as one of the two nurses who departed through the gate to catch the last bus to Kamloops at the closure of the TB Sanatorium at Tranquille on October 3, 1959 (p. 176).

Constance Cooper (1921-1931) – A graduate from VGH in 1921, she was supervisor of the Tuberculosis Building at VGH from 1929 until at least 1931 (Cavers, 1949, p. 42). A death notice for a Constance Cooper shows she died in North Vancouver on June 26, 1949 at age 61 and this possibly is her. (Cooper, Constance Louise. Vital Event Death Registration. Reg. Number: 1949-09-006311. Retrieved Mar. 15, 2004 from <http://www.bcarchives.gov.bc.ca/sn-1BB1BEE/query/Deaths/find-ad>)



Florence Elaine Dorken (1955-1972) – A 1955 graduate from a nursing school in Montreal, she worked first as a VON nurse there and then came to Vancouver. She received a diploma in PHN from UBC in 1959. Following graduation from UBC, she worked with the provincial mental health services in Burnaby and as an industrial nurse. In 1968, she joined Dr. Stefan Gryzbowski’s staff in the Northwest Territories where a new program – called “Operation Pill Pot” – was started in 1972 to control tuberculosis among the Inuit peoples. The program was designed to extend the use of chemoprophylaxis and BCG (vaccination) to bring TB under control earlier and to cut down on the long hospitalizations away home. (Source: *The Province*, Thursday February 3, 1972, p. 31)

Miss M. Duncan (1930-1936) – In 1930, Miss Duncan replaced Tranquille’s Matron Blanche Bibby while she was on vacation. Miss Duncan was described as the assistant lady superintendent at this time. She was still assistant matron in 1936.

Mary Eddie (1941-1942) – A 1941 graduate of the Vancouver General Hospital and a 1942 graduate of the baccalaureate program at the University of B.C. School of Nursing, Mary Eddie joined the staff of the Willow Chest Centre, Division of TB Control (VGH *Alumnae Newsletter*, June 1942). No further information is available.

Evelyn Edwards (Mrs.) (1914-1919). A 1914 graduate of the Royal Jubilee Hospital in Victoria, she was identified in the 1915 Annual Report of the B.C. Anti-TB Society as doing visits for the Victoria Anti-TB Society April to November 1915, prior to the hiring of Miss C.W. Thom (q.v.) in 1916. She registered with the CRNBC in 1919, soon after registration became available. No other definite information could be found about her. An Evelyn Marie Edwards died in Vancouver March 17, 1945 at age 51 and this could be her. (Edwards, Evelyn Marie. Vital Event Death Registration. Reg. Number: 1945-09-659006. Retrieved April 1, 2004 from <http://www.bcarchives.gov.bc.ca/sn-379D7A8/view/Deaths/find-ad>) (CRNBC Registration files)

Miss Ehlers (c1920s) – A Miss Ehlers (no first name) is mentioned in a note in a 1927 issue of the *Tranquillian*; the note said she came to visit one of the nurses working there and that she had been on staff. In 1927, she was working at the Penticton Hospital. A Winnie Ehlers graduated in 1919 from Royal Jubilee Hospital in Victoria and took a course at the University of B.C. and became an early Public Health Nurse – but this probably is not her. A sister, Mary Ehlers, also graduated from RJH, in 1922 and it is more probable that she is the correct individual. (See Zilm & Warbinek, 1994; Pearson, 1985, pp. 47, 48, 49.)

Marion Frame (1923) – A graduate of Galt Hospital, Lethbridge, Alberta, she is mentioned in *The Canadian Nurse* (1923, 2, 111) as having taken a position at Tranquille.

Ella Forrest (1907- 1947) – Ella Forrest graduated from New England Baptist Hospital in Boston, Massachusetts in 1907. She got her initial registration in B.C. in 1918 (the year registration was established) and worked at Vancouver General Hospital. She was "Supervisor of Infectious Diseases Hospital, Vancouver General" from 1927 to 1947 (Cavers, 1949, p. 22) – which, no doubt, included some TB care. There is a small photograph of her in Cavers, which we were unable to reproduce. She gave a paper to the B.C. Hospital Association in September 1929 on medical asepsis related to stopping cross infection from patient to patient ("News Notes," *The Canadian Nurse*, 1929). Ella Maude Forrest died October 7, 1956 at age 79. (Forrest, Ella Maude. Vital Event Death Registration. Reg. Number: 1956-09-010778. Retrieved Mar. 15, 2004 from <http://www.bcarchives.gov.bc.ca/sn-1BB1BEE/query/Deaths/find-ad>)

Harriet E. Gerry (circa 1920s) – Born in Saskatchewan on August 1, 1892, she was a 1922 graduate of the Royal Alexandra Hospital in Edmonton (CRNBC Registration Records, May 27, 2004). She then spent five years as a travelling nurse in the federal Indian Service (likely 1922 to 1926). She then took a Public Health Course at the University of Toronto (Gibbon & Matthewson, 1947, p. 447) and returned to the Indian Service as a travelling nurse with the Vancouver/ New Westminster district working there circa 1930 as one of the early Indian Service nurses in the area.

Hazel Gibney (c1940s) – Miss Gibney was matron of the Coqualeetza Indian Hospital (Sanatorium) in the 1940s and had had a staff of about 10 nurses. She had been recruited from the Fort Qu'Appelle Indian Hospital in Saskatchewan.

Mryl Hutchinson Glanville (circa late 1930s to 1972) – A graduate from the Vancouver General Hospital School of Nursing in 1936, she joined the staff at the Willow Chest Clinic, Division of TB Control, retiring in 1972 (VGH School of Nursing Alumnae Association *Newsletter*, Spring 1972).

Miss Hawke (circa 1930s) – Miss Hawke was Assistant Supervisor, TB Building at the Vancouver General Hospital in the 1930s. (She was not a VGH graduate.) She is known to have assisted with care of patients receiving early pneumothorax treatments in the “Pnemo room” (see photograph in Section I).



Mary Hodgetts (occasionally spelled Hodgett) (circa 1920s) – Mary Hodgetts was born on January 20, 1877, in England and took her nursing education program there, graduating in 1908. She registered in B.C. on July 19, 1921 (CRNBC Registration files). She was Matron at Tranquille from 1923 to 1926. A note in *The Tranquillian* (1926) says she resigned as matron of Tranquille after "a long connection with the institution ... [as] both nurse and matron" (7 (12), p. 13). Norton (1999) reports she resigned for health reasons. The photograph of her is from Norton (1999) and the original is with the B.C. Archives (BCARS I-52945.) The B.C. Vital Statistics Death Registration Records were checked but no Mary Hodgetts of Hodgett was found.



Trenna Hunter (circa 1942) – In 1942, Trenna Hunter was appointed nurse in charge of the Hastings Park (Vancouver) Camp for 3,200 Japanese Internees after the invasion of Pearl Harbour in World War II. She was responsible for the establishment and supervision the hospitals, including the 100-bed TB hospital, and for the hiring of senior staff to care for patients. A graduate of the Vancouver General Hospital (1939) and of the baccalaureate program at the University of B.C. School of Nursing in 1944, she was director of nurses for the Vancouver Metropolitan Health Services from 1944 to 1966. She also served in many executive positions and was president of the Canadian Nurses Association (1956-1958). (Sources: CRNBC Biographical Files, CRNBC Oral History Tape and Transcription; Baumgart & Larsen, 1992. Photo from *The Canadian Nurse*, April 1983, p. 46.)



K. Mary Johnson (1966-1969) – Miss Johnson served as the charge nurse from 1966 to 1969 at the Miller Bay TB Hospital for First Nation's Peoples near Prince Rupert (q.v.). She had received her early nursing education and a certificate course in TB nursing in England before coming to Canada in 1946 and joining the Indian and Northern Health Services in 1947. She left Miller Bay the year before it was finally closed and the few remaining patients transferred to the new Prince Rupert General Hospital. By this time the numbers

of hospital patients with TB had dropped to about 10. (Personal communication, Miss K.M. Johnson with GZ, February 14, 2006.)

Emily L. Jones (circa early 1920s) – Miss Jones was a charge nurse at the TB Pavilion of the Royal Jubilee Hospital in Victoria in the early 1920s until 1924 when she was appointed assistant supervisor of nurses at RJH. (*Canadian Nurse*, 1924, 20 (2), 104)

Nellie Moore Jones (1936) – A graduate of the Vancouver General Hospital (1923), she took her PHN certificate from the University of British Columbia in 1936. She was employed at the Vancouver Island Unit of TB Control in the 1930s and wrote an article on TB for the *Public Health Nurses Bulletin* in 1939 (Jones, 1939).

Mrs L. Kelly (circa 1949) – Mrs. Kelly was Superintendent of Nurses at the Vancouver Unit, Division of TB Control in 1949.

Elsbeth Kilpatrick (later Mrs. C. H. C. ("Harry") Bell). (1932-1993) – Elspeth Kilpatrick, born 1907, nursed at the Vancouver Preventorium from about 1932 and resigned Aug. 1, 1933. She married the following month to Dr. C.H.C. Bell. She was a graduate of the Vancouver General Hospital in the University of B.C. program and graduated from UBC in 1930. Her twin sister Heather Kilpatrick also was a nurse graduating from UBC in 1931; Heather joined the provincial public health department at Cowichan and eventually was the first Director of Public Health Nursing in B.C. provincial health services (Green, 1983). Elspeth's daughter Jan Bell Scott, also a UBC nursing graduate and on the faculty of the UBC School of Nursing, said she thought her mother worked with the Children's Aid Society in Vancouver after immediately after graduating from UBC, and she may have gone to the Preventorium from the Children's Aid, as it was major sponsor of and contributor to the Preventorium. She no longer worked in nursing after her marriage, and she died June 11, 1997. (Jan Scott, personal communication May 2004).

Eleanor Kunderman (1950s) – Miss Kunderman was born September 20, 1921, and graduated from St. Paul's Hospital in Vancouver in 1944. During her training she affiliated at Tranquille. She then took the University of B.C. certificate program in teaching and supervision in 1947. From 1947 to 1951, she was a head nurse at St. Paul's and from 1951 to 1959, she was a nursing instructor at Willow Chest Centre, taking time out to obtain her Bachelor of Science in Nursing in 1956. She then became supervisor of nursing education in the Division of TB Control. After she left TB Control, she joined the World Health Organization and worked in Tehran and later in India, Sri Lanka, Katmandu, Nepal, and Burma. At some time, she obtained a master's degree from Teachers College, Columbia, in New York. She retired in 1977. She was also the author of an article, with Esther Paulson (q.v.) on TB nursing in B.C. that appeared in *Nursing Outlook* in 1956.

Miss Lauder (c1911) – A graduate R.V.H., Montreal [Royal Victoria?], she joined the early staff of the Tranquille Sanatorium (Source: "Hospitals and Nurses," *The Canadian Nurse*, Vol. 7, No. 3, March 1911. p. 127).

Miss D. Lawrence (circa 1949) – Miss Lawrence was an Instructor at the Vancouver Unit, Division TB Control in 1949.

Dorothea M. MacDermot (1931-1935) – She was a nurse at the Preventorium in Vancouver (later matron) 1931-1935 and was first vice-president of the Vancouver Graduate Nurses Association (*The Canadian Nurse*, 1933, Vol. 29; lists of association officers, which ran several times during year). CRNBC records show that she was born in Jamaica on January 24, 1894, and took her nursing education in Quebec, graduating in 1921. The *History of the School of Nursing of the Montreal General Hospital* (MacDermot, 1940, p. 121) shows that she graduated from there in 1921. Her date of registration in B.C. was October 1, 1930. (Also listed occasionally as M.D. MacDermot) (B.C. Death Registration Records Checked September 5, 2004).

Margaret Macdonald (c1940s?) – The list of nurses at the Coqualeetza Indian Hospital shows that she was matron in 1941. She graduated from Winnipeg General in 1928 and had experience in TB nursing before coming to B.C.

Sybil (Nan) Annie Stuart (later MacFarlane) (c1940s-1950s) – As a student nurse, nearly completing her nursing education program at the Royal Jubilee Hospital in Victoria, Nan Stuart contracted TB and was admitted to Tranquille, where she remained for three years. After her discharge, she returned to RJH and graduated in 1947. She later attended the University of B.C. School of Nursing to obtain a Diploma in Public Health Nursing in 1950. She then worked with the TB screening program on the West Coast before her marriage. When she was in her 70s, she wrote an article on her experiences as a patient at Tranquille ("Tranquille: Memories of the 1940s," *B.C. Historical News*, Winter 1991-1992, pp. 24-26.)

Aimee Mackay (c1914-1915) – Miss Mackay was a medical missionary and both a nurse and teacher. She was put in charge of the medical wing at the Coqualeetza Residential School for First Nations Children in the early 1910s. The medical wing was primarily for care of children with TB (Pirie, c1975).

Gertrude MacKay (circa 1917) – The list in the TB Association Reports show that Miss MacKay hired by the Anti-TB Association in Vancouver to succeed Maude Hill (q.v.). See also reference Committee on Public Health Nursing of the C.N.A. (1917).

Aletha McLellan (1911) – She was appointed as the second school nurse in Vancouver (see also Elizabeth Breeze); case finding for TB was a consideration for the school nurses.

Kay MacKenzie (1952) – She was the first head nurse on the TB ward when Pearson Hospital opened in 1952 (*40, by George!*, c1992).

Wilma (Billie) C. (Wood) Marsden (circa 1930s) – Billie Wood graduated from VGH in 1919. She contracted TB as a young nurse and after treatment joined the nursing staff. She was for many years Director of Nursing, Willow Chest Centre (no dates available).

Eva Moody (1957-1958) – She was 14th and last matron of Tranquille and supervised the closure and the transfer of the last TB patients to Vancouver in September 1958. The hospital officially closed October 3, 1958 and became a psychiatric hospital to care for “mentally deficient” adults age 20 to 40 years.

Jessie A. Morrice (1920-1923) – A graduate of Toledo (Ohio) General Hospital, she was the sixth matron at Tranquille from 1920 to 1923. When she left Tranquille, she was appointed superintendent of nurses at Chilliwack General Hospital.

Winnifred Eleanor Neen (circa 1930s - 1950s) – A 1926 graduate of the Vancouver General Hospital, she held a PHN diploma from UBC in 1936. She was a staff nurse for the City of Vancouver Health Department until 1936, when the Metropolitan Health Services replaced the specialized nursing programs: TB, schools, and infant welfare. Miss Neen was appointed supervisor in the TB programs after Miss Ethel Elliott’s (q.v.) retirement in the late 1940s. She died in February 1988. (Source: Esther Paulson)

Winona Orr (1910) – Winona Orr lived from about 1892 to the 1970s (she was still alive in 1971). She was the first student assigned to the TB Pavilion at the Royal Jubilee Hospital when a permanent unit opened in 1910. (See Figure 1.1.) She graduated from RJH in 1912 (along with a twin sister, Jean.) She later married (Mrs. Alex Carruthers) and had two daughters who also were nurses. She also was pressed into service during the nursing shortages at RJH during World War II. She and her daughters established the Orr Memorial Fund for student nurses at RJH in 1971. (Pearson, 1985)

Miss Perrin (1904) – At the first meeting in Victoria, on January 21, 1904, of the B.C. Society for the Prevention and Treatment of Consumption and Other Forms of Tuberculosis, a committee was appointed and included a "Miss Perrin" who was to seek funds from the provincial government (Hatfield, I, pp. 3, 15, 17). She may not have been a nurse; she was not a graduate of St. Joseph’s or Royal Jubilee hospitals in Victoria.

Mamel Platt (c1948) – She was a nurse at the Coqualeetza Preventorium in 1948 when one of the buildings was destroyed in a huge night-time fire. She was credited in the newspapers as a heroine for rescuing a four-year-old girl who was isolated with diphtheria.

Elsie McLeod Ransom (nickname “ Rannie”) (1933-1961) – Elsie McLeod graduated from St. Paul’s Hospital School of Nursing in 1928. Following graduation, she worked at the Mayo General Hospital in the Yukon, then married Percival Ransom. The family moved to Kamloops in 1933, and Elsie started working at Tranquille. She became supervisor on the second floor of the Greaves Building. She remained on staff at Tranquille until it closed in 1958. She then transferred to the TB Unit of the Provincial Mental Hospital at Essondale until 1961 when she retired. She died at age 104 in 2000. (B.C. History of Nursing Biographical Files, B.C. History of Nursing Memorial Book)

Gladys Reynolds (circa 1942 to 1950s) – Gladys Reynolds was recruited by the B.C. Securities Commission to set up a hospital for Japanese internees at Slocan, B.C., in 1942 when a large number of Japanese were moved to the area because of concerns about national security when Japan carried World War II into the Pacific region. Once the health situation stabilized in the community, she became the clinic nurse at New Denver Sanatorium in 1943 and later was in charge of the New Denver San for many years. (*Medical Aspects ...*, c 1979)

Marie Sorenson (later Montgomery) (1943-1949) – Marie Sorenson, born March 31, 1922, graduated from Vancouver General Hospital School of Nursing in 1943 and from the University of British Columbia baccalaureate nursing degree program in 1944. After a brief stint as a pediatric nurse at VGH, she went to work as superintendent of TB control at the Willow Chest Clinic in Vancouver. She remained there until 1949, when she was recruited as superintendent of nurses to open a new TB Sanatorium in Corner Brook, Newfoundland. There she set standards, hired appropriate staff – and frequently had to orient them herself to standards of TB care. The new San was successful, but unfortunately after a few years there she contracted TB and was sent to Montreal for treatment, remaining in a Sanatorium there for one year. She then returned to Vancouver and went to work at the Health Centre for Children at VGH until 1957, when she married. She left nursing when she had her first baby and the family moved to Sechelt, B.C., but remained interested and involved in community affairs, particularly in the Auxiliary of the Sechelt Hospital. She received the RNABC Member Recognition Award in 1992 for her services to the nursing community and in 2003 received the B.C. Hospital Auxiliary Life Member Award. She was a long-time member and supporter of the B.C. History of Nursing Group. She died in December 2003. (Source: B.C. History of Nursing Group Biographical Files; Photo from VGH *Annual* 1944, p. 18)



Edith I. Stocker (circa 1939) – She was supervisor of Tuberculosis Nursing at Vancouver General Hospital in 1939 (Cavers, 1949).

Isabel Stewart (later Mrs. R. Burris) (1911-1912) – A graduate of Winnipeg General Hospital, in 1910, she was matron at Tranquille in 1911 and 1912. (*Alumnae Association of the Winnipeg General Hospital and Health Sciences Centre School of Nursing, 1989*; “Hospitals and Nurses,” *The Canadian Nurse, 1911*, Vol. 7, No. 3, p. 128).

Kathleen Strueleus (circa 1909) – A staff nurse at Tranquille in 1909, she was a 1905 graduate, probably of Calgary General Hospital; a photograph of her, taken with other unidentified staff at Tranquille, is available through the Glenbow Archives (Photo No. NA-1372-5).

Muriel Upshall (1936-1937) – Born in 1906, she was a graduate from the Vancouver General Hospital and University British Columbia schools of nursing in 1929. She worked only briefly with TB patients as a public health nurse in Richmond, B.C. in 1936-1937. She then joined the UBC Student Health Services on the campus and worked there until her retirement in 1971. She died in 1989. Photo is available in the BCHNS biographical files.



Miss E.H. Wace (circa 1930s) – She was assistant to the medical superintendent and in charge of the plaster work and splints at the Queen Alexandra Solarium on southern Vancouver Island. She apparently had received training at Alton, a TB hospital in England. She may have been related to Dr. C. Wace, who wrote an article on the Solarium in 1927.

Roma Walker (1938 - 1940s) – Rona Walker graduated from Vancouver General Hospital in 1923. She was employed at the Vancouver Preventorium in 1938 and at some point became Matron. She was definitely matron in 1944. She may have remained until the Preventorium was converted into the Sunny Hill Hospital for Children in the 1950s. From 1961 to 1967, she ran a Red Cross Outpost Hospital in Alexis Creek, B.C. (near Williams Lake), where she was “her own cook, staff, emergency first aid service, bottle washer, etc., and ... delivered a baby in the back seat of a car while rushing the mother to hospital in Williams Lake” (Vancouver General Hospital School of Nursing Alumnae Association *Newsletter*, 1964). In 1967, she left Alexis Creek and moved to the General Hospital at Queen Charlotte City, B.C. She retired to Kelowna in 1979 and died in 1992 (VGH *News*, Spring 1993).

Miss Wallace (circa 1915) – A Victorian Order of Nurses nurse in Victoria, she was paid by the Anti-TB Society to provide care to TB patients. She is mentioned in the annual reports as having done the "visiting for TB" in November 1915. She worked with Mrs. Edwards (q.v.).

Therese Adelaide (nee Scullion) Webster (1959-1969) – A graduate from St. Paul’s Hospital in Vancouver in 1938, she received a nursing diploma in teaching and supervision from the University of B.C. in 1958 and a BSN degree in 1960. She worked in the operating room at the Willow Chest Centre 1959-1960.

Mary White (circa 1919) – For six months, in late 1919 and early 1920, Mary White was Tranquille’s sixth Matron. She was there during the trying time of adding another 102 patients (to a total of 230 beds, of which only 70 were for civilian patients) in the rapidly growing facility and trying to attract nurses to raise the staff to 16. Temporary plans were made to house the nurses on the third floor of the infirmary while the Anti-TB Society tried to raise funds for a nurses’ home. (Norton, 1999)

Mrs. James Whitmore (early 1930s) – A former nurse’s aide from Tranquille, she ran a small boarding house for patients suffering from mild TB in downtown Kamloops in the early 1930s (Norton, 1999, p. 134).

Eileen Williams (later Evans) (1936-1937) – A graduate of Vancouver General Hospital and of the University of British Columbia School of Nursing (1936), she then worked as a public health nurse in Richmond (Steveston) with Muriel Upshall (q.v.).

Ethel Wildman (later Mrs. Webb) (1956 - 1969). Born in Alberta about 1912, Ethel Wildman came with her family as a young girl to the Chilliwack area of British Columbia. She graduated from St. Paul's Hospital School of Nursing in 1934, and after a brief nursing career married and began to raise a family. After her family (two daughters, one of whom died at age 19) was grown, she returned to nursing at the new Coqualeetza Hospital in Chilliwack and worked there from 1956 to 1969. In an interview (September 13, 2004), Mrs. Webb said that during her time there, many tuberculosis patients were cared for, and that surgery (such as thoracoplasty to deflate and rest the diseased lung) was still common. The Coqualeetza Hospital also supplied field nurses who did case-finding and follow-up care for both First Nations and veterans. Mrs. Webb was able to identify a list of nurses who worked at the hospital in those later years (see Appendix D).

Miss H.I. Willis (circa 1926) – She was appointed Nurse-in-Charge of the Queen Alexandra solarium in 1926.

Jean Woodbury (1958) – She was one of the two nurses who departed through the gate to catch the last bus to Kamloops at the closure of the TB Sanatorium at Tranquille on October 3, 1959 (Norton, 1999, p. 176).

Appendix A
TRANQUILLE SANATORIUM STAFF 1907-1957
(Partial List)

Matrons at Tranquille Sanatorium, 1907 - 1957

1907 - 1910	Jean Matheson
1911 - 1912	Isabel Stewart (later Mrs. R. Burris)
1912 - 1913	Miss Gillard *
1913 - 1917	Mary Thomas
1917 - 1919	Mary Ferguson (later Mrs. Whitecross)
1919 - 1920)	Mary White
1920 - 1923	Jessie A. Morrice
1923 - 1926	Miss M. Hodgetts
1926 - 1937	Blanche Bibby
1937	Miss Barter (acting) *
1937 - 1946	Gladys Currie
1946 - 1948	Olive Clancy *
1948 - 1950	Miss Hodgson
1950 - 1957	Mary Rowles
1957 - 1958	Eva Moody

* Indicates no biographical information; for all the others, see notes in the Dictionary above

Note: In the Annual Report of the B.C. TB Society for 1911, Dr. C.H. Voorman, the medical superintendent, wrote: "I wish to personally express my appreciation and gratitude to the earnest work and untiring attention of Miss McGilvray, the matron, and her staff of nurses" (p. 9). Other than this mention, there is no record of McGilvray. She probably was the matron at Royal Inland Hospital in Kamloops, where Dr. Voorman also cared for some TB patients.

Medical Directors at Tranquille TB Hospital 1907 - 1957

1907 - 1910	Dr. Robert Washington Irving
1910 - 1910	Dr. J. J. Thompson (April to August)
1910 -	Dr. D. W. Davis (briefly)
1910 - 1918	Dr. Charles Harvey Voorman
1919 - 1920	Dr. Lester G. Houle
1920 - 1921	Acting Medical Directors/ Superintendents**: Dr. C.H. Voorman; Dr. James Kearney (more than once during this period); Dr. A.E.H. Bennett
1921 - 1937	Dr. Alexander Lapp
1937 - 1951	Dr. Herbert Stewart Stalker
1952 - 1958	Dr. Frederick Oren Roswell ("Roscoe") Garner

** During this time, the provincial government took over responsibility for the hospital from the

Anti-TB Society, which was in serious financial difficulties in trying to raise money for the institution. As well, the Balfour hospital was closed and its remaining 30 patients transferred to Tranquille.

Nurses (Partial List) at Tranquille, 1919-1936

The following list of 74 nurses was compiled by Ethel Warbinek from articles and notices in issues of *The Tranquillian*, which was published from 1919 until 1936. These nurses are not listed elsewhere in this report and we are aware that this list may be incomplete.

Julia Maryon Arnold (also spelled Arnould in some places) - circa 1934; resigned in September 1934, to take PHN course at UBC
 Miss Bayntun - c 1931; resigned in 1932 to be married
 Miss Bedard - 1927; left to be married
 Mrs. Blackford - c 1930
 Miss Blanchette - 1933
 Miss G. Blizard -1932
 Miss G. Brown - 1936; resigned in 1936
 Miss D. Campbell - 1935
 Miss Carlin - 1931
 Mrs. Carswell (may also be spelled Caswell) - c 1931-1934
 Miss Chritchley - 1931
 Miss Dalton - 1933
 Miss Dank - 1931
 Miss Darke - 1932
 Miss E. Dee -1935 and 1936
 Miss C. Dilworth - 1936
 Miss A. Donne - 1932-1936
 Miss K. Doumont - 1934
 Miss E. Fidick (also spelled Fiddick) - 1935-1936
 Miss M. Finch -1935
 Miss J.E. Galbraith - 1919
 Miss Menotah Gilbert -1934, resigned to be married
 Miss L. Glanville (also spelled Glenville) - 1934 - 1936
 Miss Gregson - 1930 - 1931
 Miss R. Hammond - 1931-1936
 Miss Harper - resigned in 1930 to open a private nursing home in Victoria named "Sunny Hill"
 Miss M.B. Harvie - 1919
 Miss Hill - resigned 1931
 Miss Hosking - resigned 1930
 Miss A. Hudson - circa 1936
 Miss Marion Ireland - circa 1931
 Miss Jarrett - resigned 1931
 Mrs. Jervis - 1930 to at least 1932
 Miss Hilda Johnson (later Chisholm) - circa 1927; graduate of Saskatoon General Hospital
 Miss M. Johnson, from North Vancouver - joined the staff in 1930

Miss Nettie Johnston - circa 1935
Miss Helen M. King - resigned from the nursing staff at Tranquille in 1931; she later was director of nursing at Vancouver General Hospital
Miss Violet Kingscote - 1931 to 1936
Miss Kitchner - joined nursing staff in 1931
Miss R. Laidman - 1930 to 1935
Miss E. Lamb - 1933 to at least 1936
Miss D. Lauder - circa 1935
Miss Lawlor - 1927
Mrs. McCabe - 1924 to 1927, and circa 1932
Miss MacDonald (also spelled McDonald) - 1933 to 1934; night supervisor 1934-1935
Miss B. McPherson - 1936
Miss H. Milton - 1935
Miss Mae Murray (later Mrs. Walter Flynn) - circa 1926 to 1927
Miss Neff - 1927
Miss A. Neil - 1936
Miss M. Palmer - 1936
Mrs. Patterson - 1930
Mrs. Pattison - 1931; may be the same as above
Miss Pollock - 1931
Miss D. Ponsford - 1936
Mrs. E. Rawson - 1936
Miss E. Rice - 1935
Miss Rowan - 1933
Miss M. Ross - 1934 to 1936
Miss Winifred Rowe (later Mrs. Jack Duggan) - 1928
Miss F.H. Saunders - 1927
Miss Z. Service - 1933 to 1934
Miss I. Sinclair - 1933 to 1936
Miss Smith - resigned in 1931
Miss Snowswell - 1931
Miss Spurr - returned to the staff in 1927; previous dates unknown
Miss M. Jean Taylor - 1931- 1933
Miss I. Todd - 1931 - 1936
Miss A. Thom - 1930 on; in 1934, she was attached to the Vancouver City Health Department
Miss C. Thompson - 1935
Miss Townsend - returned to join the nursing staff 1930 - 1934
Miss O. Vail - 1936
Miss Webster - 1931-1933
Miss Wyatt - 1931
Miss Florence Matilda Zettergreen (later Darling) - circa 1926 - 1934

Appendix B
VANCOUVER ROTARY CLINIC SENIOR NURSING STAFF 1919-1935
(Partial List)

This chronological table identifies nurses who worked at the Vancouver Rotary Clinic. Much more research needs to be done into the Rotary Clinic and its history. So far we have not found any repository that has its records.

1919 to at least 1922 - Josephine Peters was the first "visiting nurse" at the Rotary Clinic (with Dr. Voorman); she apparently stayed a while (mentioned in the 1st and 3rd annual reports (Canadian TB Society Annual Reports); see also biographical notes above

1920 - Miss McKay was the Clinic's visiting nurse (identified by Dr. C.H. Voorman in his report to the Canadian TB Society at its annual meeting in Vancouver, June 1920)

1921 - Miss Miller was mentioned in the third annual report on the Rotary Clinic, as having worked at the "Fresh Air Camp at Point Grey" for undernourished children during the summer; she may not have been a nurse.

1922 - Miss Ethel M. Elliott -- nurse in charge of the Rotary Clinic

References

Canadian Tuberculosis Association. (1912-1945). *Annual Reports of the Canadian Tuberculosis Association*. Toronto: William Briggs. [UBC Woodward Storage W1 CA642.]

Gibbon & Mathewson, 1947.

The Tranquillian, Vol. 3, No. 9, April 1922, p. 3.

Wherrett, 1977, p. 147.

Appendix C
VANCOUVER PREVENTORIUM NURSING STAFF 1931-1958
(Limited, Partial List)

Matrons (there may be more)

1931, Nov. 2 - 1935 – Dorothea M. MacDermot

1935 - until after 1938 – Helen Conner

c1944 – Rona Walker

Nurses at the Vancouver Preventorium

Although there are few references to the staff of the Preventorium, an occasional report in the documents of the Vancouver Archives occasionally mention staff nurses, such as the following:

Miss Naisbitt - c1933

Miss Roberts - c1933

Mrs. Cummings - c1933

Miss Ogilvie - c1933

Miss Kilpatrick - resigned Aug. 1, 1933 (see also “Other TB Nurses”)

Miss Webster - resigned Sept. 1, 1933

Miss M.D. MacDermot - c 1933 (see also “Other TB Nurses”)

Mrs. Dix - c1935

Appendix D
COQUALEETZA NURSING STAFF 1888 - 1968
(Partial List)

Aimee Mackay – circa 1914 -1915
 Hazel Gibney – matron, 1941, from the Fort Qu’Appelle Indian Hospital in Saskatchewan (see also “Other TB Nurses”)
 Margaret Macdonald – charge nurse, 1941
 Olga McDaniels – matron May, 1942
 Miss A. MacKay – zone superintendent (field nurse), c1942
 Miss Rossa – field nurse, c 1943
 Miss A.V. Bush – matron, 1948 to 1969 (see also “Other TB Nurses”)
 Mamel Platt – nurse 1948 (see also “Other TB Nurses”)
 Mrs. L. Lockhart – assistant matron 1953

These nine nurses were identified through materials in File boxes at the Chilliwack Archives; the nurses listed below were identified by Mrs. Ethel Webb as nurses she had worked with at Coqualeetza 1956-1969.

Laurie Anderson
 Margaret Anderson
 Ellen Barrett
 Blanche Beutler
 Pat Hagukill
 Edith Hansen
 Rose Kurluh
 Ferne Macdonald
 Gwen McBride
 Lora McPherson
 Gloria Rumsey
 Alice Slain
 Jan Swinnard
 Marjorie Thompson (field nurse)
 Anna Vogt
 Ethel Wildman Webb (see also “Other TB Nurses”)
 Marjorie Whitehead

Appendix E
NEW DENVER SANATORIUM NURSING STAFF 1942-1951
(Partial List)

This list was compiled from various sources, although mainly from the two sources listed below. It may be incomplete.

Matrons and Nursing Staff

Miss Boyd – Matron 1942- c1944

Miss Gladys Reynolds (q.v.) – Matron c1944 - 1951

Mrs. Simpson – Assistant Matron

Mrs. Younge

Miss Farrel

Miss Bowlan

Miss Mizuhara

Miss [Irene] Anderson (q.v.)

[Miss Beth Shirley – was a psychiatric nurse at the time, she later completed her RN]

Physicians

Dr. Arnold Francis – had been a physician in Slocan since 1930, and was put in charge of the Slocan Hospital and the New Denver Sanatorium

Dr. Matasaburo Uchida – a Vancouver physician who was interned and sent to Slocan and then put in charge of the New Denver Sanatorium for \$100 a month during the 1942-1946 internment years

Sources:

Calderwood, Denise. (2003). *Tabiji: She journeyed with them* [Documentary film]. Calgary: Author.

Medical aspects of evacuation days 1942-1946 (New Denver [B.C.] - Slocan). (c1979). Nakasp, BC: Arrow Lakes News. (Available Woodward Biomedical Library Memorial Room M-3000)

Appendix F
WILLOW CHEST CENTRE, DIVISION OF TB CONTROL,
VANCOUVER, NURSING STAFF 1933 - to end of study [1960]
(List of Nurses Assigned for the Opening of the Division)

In 1933, Vancouver's medical health officer created a tuberculosis division in the city's health department that included 11 field nurses under Miss M.E. Elliott (q.v.); there were also 2 clinic nurses (Hatfield, n.d., vol. 2, p. 3). These nurses were:

Laura Sanders

Florence M. Erickson ("Babs"), Certificate in PHN, UBC 1927 (q.v.)

Alena Croll, later received her Certificate in PHN, UBC 1936

Molly Granger

Elizabeth Stoddard

Anne Baird, Certificate in PHN, UBC 1931

Winnifred Neen, Certificate in PHN, UBC 1936: documents, artifacts available in
the Esther Paulson collection, B.C. HoN Group Archives

Doris Bullock

Mary McPhee (BApScN, UBC, 1930)

Helen Tipping (Helena B. Tipping), Certificate in PHN, UBC, 1931

Note that 7 nurses, including Elliot, had post-graduate public health nursing education.

Appendix G OTHER TB FACILITIES

This Appendix contains the names of other TB Facilities mentioned in materials used in our research but about which we could find no other information. This is by no means an exhaustive list.

Burrard Sanitarium, Vancouver

This sanitarium is mentioned in Cavers (1949, p. 27). This hospital apparently closed about 1913-1914 as three students from this agency transferred to Vancouver General Hospital and graduated in 1915. It would be worthwhile to follow up this institution.

Townsend Place, New Westminster

This was a private hospital opened in 1910 by Miss Isabelle Maud Hill (q.v.). Matron was a Mrs. Nelson. This likely catered to TB patients who could afford private hospital care, and was just one of the many entrepreneurial private hospitals run by nurses.

Vernon Villa

This was a TB sanitarium run by the Sisters of Saint Ann and was open during the 1920s. Other than a photograph available through the Archives of the Sisters of Saint Ann, we were unable to find any other information at this time.

LITERATURE REVIEW AND REFERENCES

Early Tuberculosis Nursing in British Columbia

This is the full reference list for this project, with documentation for items consulted, other bibliographic materials, and notes on sources. Although it is not exhaustive, it provides background for the general information about TB used in this report and provides sources from which we obtained information related to the individual nurses mentioned or described. A large portion of this material was examined while we were actively involved in an earlier historical research project on TB Nursing Care in B.C. 1895-1945. That active research "review" began in 1995 and ended when that project was "completed" in December, 1998. An earlier version was printed and distributed for the International History of Nursing Conference held in Vancouver in 1997. Another version was printed for a presentation to the National Nurse Educators' Conference, Canadian Association of University Schools of Nursing, held in Vancouver February 2000. However, as no historical research project is ever "complete," we continued to add references that come our way. In 2004, we once again began active research to identify more about the individual nurses and their careers in TB nursing and additional references were added related to that research.

Annotations have been added to items that contain relevant historical information that might not be obvious from the title.

The style used in this Bibliography is based on that recommended in the *Publication Manual of the American Psychological Association* (4th ed.) (Washington, DC: American Psychological Association, 1994), which was the most common reference style when we began the project. The style used for archival documents is based on that recommended for use in Canadian archives. The styles have been adapted slightly to provide additional information (such as the full first names of authors where these are known). Surnames beginning with Mac and Mc or M' (abbreviated forms of Mac) are filed at the beginning of the M section, with these prefixes all being filed as if they were Mac and based on the capital letter following.

This bibliography includes several categories:

Primary Sources:

Interviews, including personal interviews and taped interviews and typescripts of interviews available in the UBC School of Nursing Archival Collection and the CRNBC Library's Oral History Collection.

Documents and Reports, usually from Museums and Archives, including the UBC Library and Woodward Biomedical Special Collections; the UBC School of Nursing Archival Collection; B.C. Lung Association; the B.C. History of Nursing Group's Archival Collection; and the Vancouver Archives (especially for the Rotary Clinic and the Vancouver Preventorium).

Contemporary Newspapers and Journals, most of which were viewed on microfilm in various library collections; in most instances, indexes were used to identify tuberculosis and related keywords.

Theses

Secondary sources and resources:

Textbooks (Specific to TB), especially early textbooks to find out more about principles of care in the early period

Books (General)

Articles (Journal and Newspaper), selected. We do not list all the articles examined, but only those that had specific relevance to the projects.

Internet resources

The Internet was used extensively to search for information (such as death records, materials from archives) related to individual nurses named in this report as well as for sites with information related to the various TB facilities in B.C.

LIBRARIES AND ARCHIVES CONSULTED

Libraries and Archives consulted during the research for this project included the following (with their abbreviations):

B.C. Centre for Disease Control (formerly the Division of T.B. Control), Vancouver

The Centre does not have an archives. EW and GZ visited and identified a small collection of documents and other materials kept by Fran Gendrun, one of the nurses who has been employed there for a long time. This material was searched by EW. This material includes all the annual reports from the Division from its beginnings in 1935; EW made extensive notes on this material for the years 1935 to 1945.

B.C. College of Physicians and Surgeons Library (BC CP&SL), Vancouver.

B.C. Lung Association (BCLA), Vancouver

The Association has a relatively small collection of archival documents that are not completely organized or catalogued. This material was examined in depth by GZ and EW for the years under review. See also the BCLAARCH file.

Canadian Nurses Association (CNA) Library and Archives, Ottawa

GZ visited, briefly, in June 1996 and did a quick search using various "keywords" (Tuberculosis, tb) and did a check through the vertical files kept on individuals for those nurses known (at that time) to be actively involved in TB nursing in B.C. (e.g., Matheson, Paulson, Breeze). The CNA Library and Archives has since been closed and its collection dismantled; some of these materials were donated to the Library and Archives of Canada, but the destruction of CNA's "vertical files" containing information on individual nurses is a great loss to nursing history.

Chilliwack Museum and Archives, Chilliwack, B.C. (9291 Corbould St., Chilliwack BC V2P 4A6
<www.chilliwack.museum.bc.ca >)

A visit to this collection was done on September 13, 2004 to search for materials related to the Coqualeetza School and Hospital. The Chilliwack Archives contains three boxes (Files 17, 49, and 50) and a Coqualeetza Vertical File. One of the boxes contains a scrapbook of newspaper clippings, letters, and other documents, another containing photographs, and a large vertical file that contains loose newspaper clippings. One of the boxes contains the Barclay Fonds, which was compiled by Dr. William Barclay (1941-1952). The clippings were mainly from the *Chilliwack Progress* newspaper, but are also augmented by clippings from the Vancouver newspapers (*Sun* and *Province*) for some major stories, such as the 1948 fire.

College of Registered Nurses of B.C. (CRNBC) Library and Archives

The library holds an Oral History Tape Collection, which has many taped interviews that contain information on early TB nursing. The College was, until August 2005, the Registered Nurses Association of B.C. (RNABC).

Japanese Canadian National Museum & Archives Society, 511 East Broadway, Vancouver Tel: 604-874-8090, Fax: 604-874-8164.

Kamloops Museum and Archives, Kamloops, B.C.

GZ and EW visited in September 1996 and did an exhaustive search. The museum has files on Tranquille and on TB, which were reviewed. As well, an exhaustive search of the photographic records and local newspaper indexes was carried out using keywords and names.

UBC School of Nursing Archival Collection (UBC SoN AC), housed either in the UBC Special Collections and Archives or in the History of Nursing Office in the School.

These archival collections were examined thoroughly during the research for *Legacy* and the researchers are confident that any material related to TB nursing has been included in this project.

UBC Library, including the Woodward Biomedical Library and Charles Woodward Memorial Reading Room Archives and Files, Koerner Library, and UBC Special Collections in the Main Library.

Catalogues and indexes were searched using keywords and names at various times. This Library has the early collections of *The Canadian Nurse*, the B.C. Provincial Board of Health's *Public Health Nurses' Bulletin* (three volumes, from 1924 - 1939), and the annual reports of the Canadian Tuberculosis Society, which includes the B.C. reports. These materials were examined page-by-page for the relevant years of this project.

Vancouver Archives. These archives were visited May 11, 2004 specifically to examine records related to the Vancouver Preventorium and the Vancouver Rotary Clinic. As well, EW carried out online computer searches using relevant keywords to identify other materials that might be of use.

Winnipeg General Hospital, School of Nursing Alumnae Association, Winnipeg General Hospital and Health Sciences Centre. Especially Anne Crossin, Archivist, and Allison Cowell, President, Alumnae Association. Address: 700 McDermott Ave., Winnipeg, Manitoba R3E 0T2

PERSONAL COMMUNICATIONS

Paulson, Esther. (1995 to 2001). Esther Paulson served as an ongoing resource and consultant until her

death. Her knowledge of the various individuals involved in TB care was extensive and she frequently supplied details and leads for further investigation.

Scott, Jan Bell. (February 15, 2005). Telephone interview regarding her mother, Elspeth Kilpatrick Bell, who worked at the Vancouver Preventorium.

Trelle, Sarah Mae (nee Morton). (July 8, 2005). Letter to Jean Tsuyuki of the Vancouver General Hospital Nurses Alumnae Association concerning her year of graduation from Vancouver General Hospital; the letter was passed to Ethel Warbinek. A portion of the letter has relevance to contact with TB during student years, and is quoted:

“At the end of my second year, I acquired the occupational disease TB and spent two years at Tranquille and one year at Willow Chest. ... There were other nurses in other years that [sic] were in the San I might add that Miss [Anne] Cavers, our Anatomy teacher came to Tranquille during graduation for the Class of '48 and presented us with roses. A gesture not forgotten.”

Webb, Ethel Wildman. (September 13, 2004) Interview by Ethel Warbinek and Glennis Zilm about her time working at Coqualeetza Hospital 1956 - 1969. (Mrs. Ethel Webb, Ste. 304, Lynnwood Centre, 9168 Corbould Street, Chilliwack BC V2R 8A1 Phone 604-304-9168)

JOURNALS REVIEWED

B.C. Medical Journal, Volumes 1 (1959) to Volume 32 (1990). Before 1959, this was the *Vancouver Medical Journal*. The indexes for each volume (which are not particularly well done) were checked for the subject "tuberculosis," for other pertinent keywords (e.g., Preventorium), and for various physician authors whom we knew wrote about TB in B.C. (e.g., R.H. Hill, Henry Esson Young, Fagan, Voorman, Hatfield, Proctor, and so on).

The Canadian Nurse, Volume 1 (1904) to Volume 56 (1960). This journal was searched page-by-page from from 1905 to 1925 for articles on TB and related subjects, including names of nurses who were not included in indexes; indexes were used for the period 1926 to 1960.

Public Health Nurses' Bulletin (three volumes, from 1924 - 1939), published irregularly (usually annually) by the B.C. Provincial Board of Health. This was a collection of reports written for publication by nurses in various districts, although not all nurses contributed. The first editor was Miss I.M. Jeffares, a public health nurse at Duncan. The second editor was not named. The third editor, from 1930 to 1932 was Margaret E. Kerr, who at that time was an instructor in public health at the University of British Columbia School of Nursing and who, in 1944, became editor of *The Canadian Nurse*. Volume 2, for 1933 and 1934, was a typescript version; no explanation is given for the change from the well-produced, professionally printed earlier versions, but this was the middle of the Great Depression years. In 1935, the issues once again became more professional, although not as well done as in Volume 1. The editor from 1935 to 1939 (Volume 3) was Bertha Jenkins, supervisor at the Saanich Health Unit. No explanation is given for discontinuing the *Bulletin*, but this occurred at the beginning of World War II.

The Tranquillian (later *Your Health*), from Volume 1, Number 1, in 1919 through to the 1950s (the journal continues to the present day). For the early issues, this was done page by page, in later years selectively; there are no indexes for this journal.

INTERNET SOURCES/ RESOURCES

Using keywords, researchers have access to thousands of sources and resources on TB through the Internet. The following address are some of the main centers in the United States focussing on TB research and control. Considerable current information is available for patients and health care providers.

New York City Department of Health via New York Online Access to Health (NOAH)
<http://www.cpmc.columbia.edu/tbcpp> (Webcrawler, Medicrawler)

Up-to-date information about TB written by the Bureau of TB Control of the New York City Department of Health

Stanford University Tuberculosis Research Center <http://molepi.stanford.edu/>

Purpose of these pages is to foster international collaborations between TB researchers.

Francis J. Curry National Tuberculosis Center, San Francisco
<http://www.nationaltbcenter.edu/home.html>

One of three model TB centers funded by the divisions of TB elimination, centers for disease control and prevention

SOURCES NOT FULLY EXPLORED

British Columbia Provincial Archives. Some archival materials are available on the Internet, which was searched using keywords. We were able to obtain other materials identified through other sources by mail.

Newspapers, including *The Vancouver News Herald*, *The Vancouver Sun*, and *The Vancouver Province*, *The Victoria Times*, and the *Victoria Colonist*. Newspaper clippings were identified in many collections listed below. At some point, items might be identified through actual page turning. For example, obituaries might prove helpful.

PRIMARY SOURCES

TAPED INTERVIEWS

The majority of these taped interviews with B.C. nurses are available in two sites: College of Registered Nurses of B.C. (CRNBC) Helen Randal Library and the University of B.C. School of Nursing Archival Collection in the History of Nursing Office in the School.

Betty Cawston. (1988). Interview by Helen Shore, October 21, 1988. Vancouver: CRNBC Oral History Collection.

Marion Fisher Farris. (1981). Interview by Beth McCann, January 28, 1981. Vancouver: UBC SoN AC.

[Transcript available]

- Ada George. (1987). Interviewed by Nina Rumen, February 24, 1987. Vancouver: CRNBC Oral History Collection.
- Helen King. (1987). Interviewed by Audrey Stegan, October 27, 1987. Vancouver: CRNBC Oral History Collection.
- Eleanor Kunderman. (1987). Interview by Audrey Stegan, October 26, 1987. Vancouver: CRNBC Oral History Collection.
- Esther Paulson. (1988). Interview by Natalie Bland, July 12, 1988. Vancouver: UBC SoN AC.
- Esther Paulson. (1993). Interview by Ethel Warbinek, February 3, 1993. Vancouver: UBC SoN AC [Transcript available].
- Irene Anderson Smith. (1977). Oral history interview, part of the Howie Smith collection, accession # 3944:48, B.C. Provincial Archives, Victoria.
- Marion Smith. (1987). Interviewed by Anne M. Dunn, April 25, 1987. Vancouver: CRNBC Oral History Collection.
- Marion Walker. (1987). Interviewed by Sue Holmes, May 2, 1987. Vancouver: CRNBC Oral History Collection.
- Beatrice Fordham Johnson Wood. (1981). Interview by Beth McCann, February 22, 1981. Vancouver: UBC SoN AC. [Transcript available]
- Beatrice Fordham Johnson Wood. (1991). Interview by Sheila Zerr, March 20, 1991. Vancouver: CRNBC Oral History Collection. [Transcript by Ethel Warbinek available UBC SoN AC]
- Alice Wright. (1988). Interview by Irene Goldstone, December 9, 1988. Vancouver: CRNBC Oral History Collection.

ORAL PRESENTATIONS

"A Look Back at Tuberculosis." Oral panel presentation with Ethel Warbinek, Esther Paulson, Nan MacFarlane, and Joan Doree. B.C. History of Nursing Professional Practice Group. Held at the B.C. Lung Association, Vancouver, on Saturday, October 31, 1998.

PUBLISHED "REMINISCENCES"

MacFarlane, Sybil A. (Nan). (1991-1992, Winter). Tranquille: Memories of the 1940s. *B.C. Historical News*, 25 (1), 24-26.

The author (as Nan Stuart, a 22-year-old student nurse) contracted TB during her final year in her nursing education program. She spent about a year at home but the disease in her lungs spread and, in November 1942, she had to be admitted to Tranquille as a patient. She stayed there for three years and then had another year as an outpatient, but eventually returned to the Royal Jubilee Hospital and completed her RN program. She went on to get a diploma in PHN from UBC. She likely contracted the disease from a patient. Undiagnosed patients might be admitted for care and staff were exposed. TB was still considered a disease of the poor -- and many people were reluctant to admit it.

About treatment: hers had started with complete bed rest, then "the welcome addition of bathroom privileges," then graded exercise starting at 15 minutes a day. Activities were then increased slowly as the patient's condition permitted; eventually a patient was allowed to go to the dining room for one, then two, then three meals a day. There were separate buildings for men and women, and they were segregated even in the dining room and recreation hall -- except for Christmas day. She said "the pervasive fear of the staff ... [was] that the patients would mingle, then produce tubercular children which would become a burden on the country requiring social

assistance" [p. 25].

Occupational therapy once off strict bed rest included such crafts as leatherwork or knitting. Ambulant patients eventually could take on easy part-time jobs in the San or its gardens; she opted for the library cart and typing and filing in the x-ray department. Patients received from \$5 to \$15 a month for this work. Finally, recovering patients were transferred to one of the six or so little "cottages" on the grounds, with a heated room and a large unheated sleeping porch. By this time, the concept of sleeping in the unheated fresh air had largely been disproved, but the San had not been able to obtain labor and materials to make the changes during the war years. Cottage life for the three or four women in the cottages sounds rather like camp life. For example, Nan and her friends managed to get a hotplate -- banned by administration because of the danger of fire -- and made fudge and, once, a stew from a pheasant snared by one of the men on the grounds.

Patient teaching was important; patients were taught simple procedures both to prevent re-infection of themselves and to protect others. She noted that some long-time staff had worked closely with patients for as long as 25 years without evidence of the disease through a positive skin test. Those who recovered "through the long, slow rest treatment" welcomed the advent of medications such as streptomycin in 1947, pyrazinamide in 1951, and isoniazid in 1952 and later ethambutol in 1968, and risampin in 1971.

Watson, Doris Martha. (1999, Winter). Christmas in a TB Sanitorium. *Pioneer News*, 22 (4), 13. (GZ photocopy) (This quarterly paper is published by HSBC Bank Canada (#800 - 888 Dunsmuir St., Vancouver BC V6C 3K4) and contains small items by pioneers.)

DOCUMENTS AND REPORTS

British Columbia Anti-Tuberculosis Society. (1907-1909, 1911-1918). *Annual reports of the directors of the Anti-Tuberculosis Society of the Province of British Columbia* [Titles vary slightly]. Victoria: Author [King's Printer]. [Reports are in the archives of the B.C. Lung Association, Vancouver.]

British Columbia Hospital Association. (1919). *Report of proceedings of the second annual convention of the hospitals of British Columbia*. Vancouver: Author. [Photocopy available in GZ files]

British Columbia Provincial Board of Health. Tuberculosis Division. (1937). *Lessons in tuberculosis for school-children and their parents*. Victoria: King's Printer.

Small, 28-page booklet, excellent photographs of various B.C. facilities. Used by B.C. public health nurses in the early 1940s. [B.C. HoN Group Archival Collection]

B.C. Tuberculosis Society & B.C. Provincial Board of Health, Division of Tuberculosis Control. (c1939). *Social assistance for tuberculosis patients*. Vancouver: Authors.

Slim, 8-page (not numbered) booklet advising about the current assistance for those unable to pay the full rate of \$3 a day for TB hospitalization. Used by B.C. public health nurses in the early 1940s. [B.C. HoN Group Archival Collection]

Canadian Hospital Council. (1937). *Report of the committees on nursing and nurse-training in Canadian hospitals and tuberculosis in the nursing profession*. Toronto: Author.

Canadian Nurses Association. (1936). *A proposed curriculum for schools of nursing in Canada*. Montreal: Author.

The CNA proposed a nation-wide curriculum in 1936 (see also Reid, 1931) and on pages 130-132 described why TB should be in the curriculum and indicates special points to be emphasized.

Canadian Public Health Association. (R.D. Defries, Ed.). (1940). *The development of public health in Canada*. Toronto: Author/University of Toronto Press. [Available VGH SoN Alumnae Archives]

The chapters are by province (and all by different authors) -- as public health is a provincial responsibility (although the term "public health" was not in use in 1867 when the Constitution was signed). The first Public Health Act in Great Britain was in 1875. See Marshall for the B.C. chapter.

Canadian Tuberculosis Association. (1912-1920). *Annual reports of the Canadian Tuberculosis Association*. Toronto: William Briggs.

Published and bound reports. These also contain abridged versions of the annual reports of the B.C. Anti-Tuberculosis Societies. [UBC Woodward Storage W1.CA642.]

Canadian Tuberculosis Association. (c1940a). *Tuberculosis from 5 to 20*. Ottawa: Author.

This glossy, four-page broadside was handed out to patients by B.C. public health nurses in the early 1940s. [B.C. HoN Group Archival Collection]

Canadian Tuberculosis Association. (c1940b). *Tuberculosis from 18 to 80*. Ottawa: Author.

This glossy, four-page broadside was handed out to patients by B.C. public health nurses in the early 1940s. [B.C. HoN Group Archival Collection]

Canadian Tuberculosis Association. (c1940c). *Why X-ray?* Ottawa: Author.

This glossy, four-page broadside was handed out to patients by B.C. public health nurses in the early 1940s. [B.C. HoN Group Archival Collection]

Canadian Tuberculosis Association. (c1940d). *You're going to have your picture taken*. Ottawa: Author.

This tiny, four-page broadside was handed out to patients at the mobile clinics. Used by B.C. public health nurses in the early 1940s. [B.C. HoN Group Archival Collection]

Canadian Tuberculosis Association. (1967). *CTA Xmas seal kit, 1967: Press section -- Newspaper fillers*. Unpublished typescript copy of information supplied to newspapers by CTA. Available Esther Paulson Papers.

Coqualeetza Institute. (1956). *The Coqualeetza story 1896-1956*. [Chilliwack, BC: Author.] [B.C. Lung Association Archives]

A mimeographed, stapled document with the history of what began as a residential school for First Nations peoples in B.C. In about 1935, the school, which was the second largest such school in Canada, opened a Preventorium on the site. The children who would live there were those who after repeated x-rays and physicals were most susceptible to TB. In 1941, the School burned down and it was decided to convert it into a Sanatorium for Indians in Canada, the first such large facility for Canadian Indians (p. 9). That year there were about 100 residents, of all age groups, in the Coqualeetza San. The Provincial TB Division and the B.C. TB Society supported this work. Coqualeetza Hospital was the administrative centre but an air force hospital near Prince Rupert was also opened in September 1946 (the Miller Bay Indian Hospital) and a vacant army hospital near Nanaimo was opened in March 1947 (the Nanaimo Indian Hospital). Part of the building at Coqualeetza was destroyed by fire in 1948. A new modern wing was opened in 1953 to bring the total number of residents there to 190.

Deming, Dorothy. (1943a). *Home care of tuberculosis: A guide for the family*. New York: [U.S.] National Tuberculosis Association.

This 64-page booklet was made available to public health nurses in B.C. through the B.C. Tuberculosis Society (marked by a sticker on the cover). [B.C. HoN Group Archival Collection]

Deming, Dorothy. (1943b). *Home care of tuberculosis: Hints for the patient*. New York: [U.S.] National Tuberculosis Association.

A 16-page booklet made available to public health nurses in B.C. through the B.C. Tuberculosis Society (marked by a sticker on the cover). [B.C. HoN Group Archival Collection]

Hatfield, W.H. (1934a). *Economics of tuberculosis*. Unpublished typescript for the Health Education Group of Vancouver, issued by the Provincial Board of Health. Available in the Esther Paulson Papers.

Hatfield, W.H. (1934b). *Tuberculosis from the public health standpoint*. Unpublished typescript for the Health Education Group of Vancouver, issued by the Provincial Board of Health. Available in the Esther Paulson Papers.

Hatfield, W.H. (n.d., c1950). *History of tuberculosis in British Columbia (Parts I and II)*. Unpublished manuscript available in the Esther Paulson Papers, available B.C. History of Nursing Group Archives.

Hudson, Jessie. (1998). *Notes*. Unpublished typescripts prepared as background for a possible

publication on "Physicians Involved in Delivery of Health Services in British Columbia." Available from the author. [Photocopy available in GZ/EW TB papers.]

These rough typescripts were prepared between about 1973 and 1998 by Jessie Hudson, a former Director or Assistant Director of the Provincial Laboratories, B.C. Department of Public Health. Ms. Hudson began the project in collaboration with Dr. Ernest John Bowman, who was we think Director of Provincial Public Health Laboratories 1956 to 1980. The notes are organized into five sections: Physicians involved in delivery (1850-1987); Physicians in Administration (1892-1980); Chronology (1855-1931) [this especially reviews changes in PH legislation]; "Significant Events in the Development of Public Health Laboratory Service" (1931-1979); Directors and Senior Staff B.C. Provincial Laboratories (1935-1981). Ms. Hudson also has searched and copied various valuable references and these are among her papers.

Paulson, Esther. (1946). The scope and challenge of tuberculosis nursing. *The Canadian Nurse*, 42 (1), 29-32.

General article related to tuberculosis nursing, with some special mention of the Vancouver Unit of the B.C. Division of TB Control. General program started for nursing and runs well.

Paulson, Esther. (1952). *Affiliation in tuberculosis nursing in B.C. and development of the educational programmes in the Division of T.B. Control*. Copy of an unpublished report prepared for the B.C. Division of T.B. Control available in the Esther Paulson Papers.

Paulson, Esther. (1964). Nursing care of the tuberculosis patient. In Canadian Tuberculosis Association, *Institute for nurses on tuberculosis and respiratory diseases* (Proceedings of an Institute held by the Canadian Tuberculosis Association and the Saskatchewan Registered Nurses' Association, Regina, May 13, 1964) (pp. B1-B12). Ottawa: Canadian Tuberculosis Association.

Paulson, Esther. (1989, Spring). Meg Thatcher – 1892-1987. *Nursing Division Newsletter* [University of B.C. Nursing Alumni Division], p. 5.

Powell, Louise M. (1921). *Education in tuberculosis for student nurses: Minimum standards recommended by the National League of Nursing Education*. [Pamphlet reprinted from *The American Journal of Nursing*, n.d. Available Woodward Biomedical Library.]

Rumen, Nina. (1948). [TB Affiliation Program: Lectures and Notes.] Mimeographed and manuscript copy of the handouts and lectures in the TB Affiliation Program offered to all student nurses in B.C. beginning in 1944. Available: Vancouver: B.C. History of Nursing Group Archives.

This rare, primary, bound file copy of notes and lectures shows the program designed by Esther Paulson and the staff of the Division of TB Control, B.C. Ministry of Health, and introduced for all nursing students in B.C. in 1944. Also included are several published pamphlets that were handed out at the time.

Shore, Helen. (1994). *Isabelle Maud Hill* (Notes and CV). Unpublished papers available in the

Biographical Files in the College of Registered Nurses of B.C. Helen Randal Library.

Stewart, J. (1983). *Tranquille, part 2: From ranch to hospital*. Unpublished paper available Kamloops Museum and Archives.

TBVets [Burnaby, BC]. (2005). *TB Vets: A legacy for British Columbia* [DVD – 15 minures]. Burnaby, BC.

DVD made to celebrate 60th anniversary. Interviewer is Mike McCardell.

U.S. National Tuberculosis Association. (1940). *Diagnostic standards and classification of tuberculosis, 1940 edition*. New York: [U.S.] National Tuberculosis Association. A 32-page booklet made available to public health nurses in B.C. through the Canadian Tuberculosis Association (marked by a stamp on the title page). [B.C. HoN Group Archival Collection]

Vancouver Archives. Vancouver Preventorium Annual Reports and Account Book 1924-1935. ADD. MSS. Z5J 515-B-7 File 8. Preventorium.

File contains (among other things): Report to the Board, September 16, 1935, pp. 1-6;
Excerpts from letter received from Dr. J.W. McIntosh. May 18, 1931, re Preventorium Proposals. [A pre-opening report]

Vancouver Archives. Vancouver Preventorium 1925, 1933-1938. 103-B-1 File 24.

File contains (among other things): Preventorium. pp. 5. [An undated, unsigned report apparently soon after it opened]; An address read by Mr. J. Newton Harvey ... to the Provincial Board of Health, July 10, 1935; The Preventorium and Tuberculosis Statistics – letter from J.W. McIntosh, Medical Health Officer, to J.N. Harvey, January 23, 1935.

Vancouver Archives. T.B. Hospital and Wards and Vancouver Preventorium. CVA 785-2. [A collection of five glass lantern slides, restricted, undated, no information, and not likely related the nurses. Examined, but not copied]

Vancouver Archives. Hospitals- Vancouver Preventorium. Microfilm 6510. Reports of Board for 1931.

Vancouver Archives. Miscellaneous (Vancouver). 1956. No. 67-B-4, File #8. [Mainly financial reports, checked because this was near the time of the closure as a TB hospital]

Vancouver Archives. Rotary Clinic for Diseases of the Chest, founded by and under the Direction of the Rotary Club of Vancouver 1918. Pamphlet collection. PAM 1918-1928.

Vancouver Archives. Health Clinic Album. 1919-1921. MSS. 718581-H-4, File 2.

Vancouver Archives. Rotary Clinic. 1922. 14-A-4.

THESES

Goldstone, Irene Lynn. (1981). *Origins and development of collective bargaining by nurses in British Columbia 1912-76*. Unpublished Master's thesis, University of British Columbia Department of Health Care and Epidemiology.

Riddell, Susan Elizabeth. (1991). *Curing society's ills: Public health nurses and public health nursing in rural British Columbia, 1919-1946*. Unpublished Master's thesis, Simon Fraser University.

Whyte, Nora Beatrice. (1988). *Provincial public health nursing in British Columbia from 1939-1959: A social history*. Unpublished Master's thesis, University of British Columbia School of Nursing.

SECONDARY SOURCES

Alumnae Association of the Winnipeg General Hospital and Health Sciences Centre School of Nursing (1989). *Nurses Alumnae Journal - 1989*. Winnipeg: Author.

Balf, Mary. (1989). *Kamloops: A history of the district up to 1914* (3rd ed.). Kamloops: Kamloops Museum Association. [Available Kamloops Museum]

Barman, Jean. (1991). *The West beyond the West: A history of British Columbia*. Toronto: University of Toronto Press.

Bates, Barbara. (1992). *Bargaining for life: A social history of tuberculosis, 1876-1938*. Philadelphia: University of Pennsylvania Press. [Difficult to obtain, available interlibrary loan Wilfrid Laurier University, Waterloo, ON.]

Using letters, etc., mainly from a collection of Dr. Lawrence F. Flick (1856-1938), this beautifully written, thoroughly researched book tells the story largely from patients' points of view, describing them as: "protagonists in their own right, bargaining with their caretakers, helping to shape and expand the institutions, and affecting outcomes of the tuberculosis campaign" (p. 2). The author is a physician/historian at University of Pennsylvania. The centre of action generally is Pennsylvania, although the truisms represent happenings elsewhere, including B.C. Bates well describes the major roles of nurses and nursing students, especially in chapters 6, 9, 10, 11, and 13.

One of Flick's innovative approaches at his Henry Phipps Institute was to open, in 1903, a school for nurses consisting only of pupils who were women recovering from TB. There are many

examples drawn from nurses of the period. The stories are fascinating.

A notable conclusion from the book – see page 230: Wealthy patients had doctors and sanatoriums; the poor had visiting nurses! [GZ's interpretation]

Bates also brings in Sir William Osler's (1903) contributions on page 234: "The battlefield for tuberculosis is not in the hospitals or in the sanatoria, but in the homes, where ... the disease is born and bred." She also discusses the home in relation to the tuberculosis problem, citing *Medical News*, 83 (12 Dec. 1903), pp. 1105-1109. Bates also quotes M. Adelaide Nutting, who in 1906 identified 32 nurses specializing in TB (Nutting, M.A. [1906]. The visiting nurse for tuberculosis. *Charities and the commons*, 16 (7 Apr. 1906). pp. 51-55. Cited in Bates 1992, p. 235.) Bates notes a Miss Mabel Jacques as the Philadelphia Society's first visiting nurse in 1907 – considerably later than B.C.'s first TB nurse

Brown, Craig (Ed.). (1987). *The illustrated history of Canada*. Toronto: Lester & Orpen Dennys.

Calderwood, Denise. (2003). *Tabiji: She journeyed with them* [Documentary film]. Calgary: Author. [Available CRNBC]

This 30-minute film was prepared as part of the requirements for a Masters in Education degree at the University of Calgary. She told the story of the evacuation of Japanese TB patients from Hastings Park in Vancouver to New Denver, B.C. Her aunt, Beth Shirley (later Mrs. Edge), was on the nursing staff and helped care for the patients.

Canadian Public Health Association. (1940). *The development of public health in Canada*. Toronto: University of Toronto Press. [Available VGH SoN Alumnae Archives]

Carswell, Sally. (1980). *The story of Lions Gate Hospital: The realization of a pioneer settlement's dream 1908-1980*. West Vancouver: Author. [Available CRNBC]

Cavers, Anne S. (c1949). *Our school of nursing 1899 to 1949*. Vancouver: Vancouver General Hospital School of Nursing. [Available Woodward]

Emory, Florence H.M. (1953). *Public health nursing in Canada: Principles and practice* (rev. ed.). Toronto: Macmillan.

Feldberg, Georgina D. (1995). *Disease and class: Tuberculosis and the shaping of modern North American society*. New Brunswick, NJ: Rutgers University Press. [Available CRNBC WF11 DA2 F3d 1995 VARN]

Gibbon, J.M. (1947). *The Victorian Order of Nurses for Canada 50th anniversary 1897-1947*. Montreal: Southam Press.

Gibbon, J.M., & Mathewson, M.S. (1947). *Three centuries of Canadian nursing*. Toronto: Macmillan.

Giblin, James Cross. (1986). *Milk: The fight for purity*. New York: Thomas Y. Crowell.

Green, Monica M. (1984). *Through the years with public health nursing: A history of public health nursing in the provincial government jurisdiction British Columbia*. Ottawa: Canadian Public Health Association. [Available CRNBC]

“Hastings Park Hospital, 1942: Ms. Irene Anderson, centre” [Photo Caption]. (1996, April). *The bulletin: A journal for and about the Nikkei community: Literary supplement (Part II)*, p. 1. [The cover shows a picture of Irene Anderson and a group of 6 Japanese nurses and nurses aides, taken at Hastings Park, 1942]

Hatfield, W.H. (1944). *Handbook on tuberculosis*. Victoria: Provincial Board of Health [King's Printer].

A terrifically useful little textbook used in B.C. and "intended as a reference by student nurses, hospital nurses, public health workers, social workers, physicians, and others" (from the Foreword). A revised edition was published in 1948.

Houston, C. Stuart. (1991). *R.G. Ferguson: Crusader against tuberculosis* (Canadian Medical Lives Series No. 17). Toronto: Hannah & Dundern Press. [Available CP&SL]

Discusses the formation of the Saskatchewan anti-TB league and various "firsts" that R.G. Ferguson instituted. For example, under his direction, Saskatchewan was the first in North America to do an X-ray survey of the population and the first to do mass tuberculin testing on children and natives [possibly in Melville].

Kelly, Nora. (1973). *Quest for a profession: The history of the Vancouver General Hospital School of Nursing*. Vancouver: Vancouver General Hospital School of Nursing Alumnae Association. [Available CRNBC]

Landells, E[dith]. A. (1995). *The military nurses of Canada: Recollections of Canadian military nurses*. White Rock, BC: Co-Publishing/ Addison Graphics.

Landells, E[dith]. A. (1999a). *The military nurses of Canada: Recollections of Canadian military nurses* (Vol. II). White Rock, BC: Co-Publishing/ Addison Graphics.

Landells, E[dith]. A. (1999b). *The military nurses of Canada: Recollections of Canadian military nurses* (Vol. III). White Rock, BC: Co-Publishing/ Addison Graphics.

Marshall, J.T. (1940). Public health in British Columbia. In Canadian Public Health Association, *The development of public health in Canada* (pp. 99-114). Toronto: Author/University of Toronto Press. [Available VGH SON Alumnae Archives]

First public health legislation in B.C. passed in the Legislative Council of the (United) Colony of B.C. on Feb. 23, 1869 "with the object of preventing or guarding against the origin, rise, or progress of endemic, epidemic or contagious diseases, and to project the health of the inhabitants of this Colony"; it gave the Governor in Council "extraordinary powers." (p. 99) The chapter contains material on C.J. Fagan, who was instrumental in setting up Tranquille.

Murphy, Herbert H. (1958). *Royal Jubilee Hospital, Victoria, B.C., 1858-1958*. Victoria: Hebden.

Nikiforuk, Andrew. (1991). *The fourth horseman: A short history of epidemics, plagues, famine and other scourges*. Toronto: Viking. [Available Woodward]

Norfolk, W. (1979). *Cooney and his clan*. Prince George, BC: Sunshine Press. [Available Kamloops Museum]

Norton, Wayne. (1999). *A whole little city by itself: Tranquille and tuberculosis*. Kamloops: Plateau Press.

Pearson, Anne. (1985). *The Royal Jubilee Hospital School of Nursing 1891-1982*. Victoria: Alumnae Association of the Royal Jubilee School of Nursing. [Available CRNBC]

Ott, Katherine. (1996). *Fevered lives: Tuberculosis in American culture since 1870*. Cambridge, MS: Harvard University Press. [Available Fraser Valley Regional Library 616.995 OTT 27.95]

Ott concludes that TB 100 years ago and 150 years ago represented a "different" disease than the one we know today because "meaning of disease evolves from the interrelationship of people, technology, medical doctrines, and state affairs" (p. 1) Conceptualization of diseases (such as TB) changes, and needs to be viewed in historical context. In the 1850s, it was a "romantic, ambiguous affliction," and around 1900 it was a "dreaded and mighty social truncheon," and in the 1990s an "entity bound up in public health and civil disorder" (p. 7).

Robertson, Betty, Marcellus, Catherine, & Dandy, Betty. (1992). *Mission's living memorials*. Mission, BC: Mission Hospital. [Available CRNBC]

Scott, Melrose. (1974). *Seventy years 1904-1974: A history of the school of nursing at Royal Inland Hospital*. Kamloops: [Royal Inland Hospital Alumnae Association]. [Available Kamloops Museum]

Wherrett, George Jasper. (1977). *The miracle of the empty beds: A history of tuberculosis in*

Canada. Toronto: University of Toronto Press.

This is the best book on the history of TB in Canada.

Weir, George M. (1932). *Survey of nursing education in Canada*. Toronto: University of Toronto Press. [Available CRNBC Library]

Zilm, Glennis, & Warbinek, Ethel. (1994). *Legacy: History of nursing education at the University of British Columbia, 1919-1994*. Vancouver: UBC School of Nursing/UBC Press. [Available CRNBC]

TEXTBOOKS

This section contains information on textbooks from the period under review that were used for information on what was being taught to nurses about TB.

Aiken, Charlotte A. (1916). *Clinical studies for nurses: A textbook for second and third year pupil nurses and a hand-book for all who are engaged in caring for the sick* (3rd ed.). Philadelphia: W.B. Saunders. [Available Woodward: WY100 A47 (Storage item)]

Charlotte Aiken was a prolific author of nursing textbooks. So far, we have not been able to find a first edition, which likely was published in 1909, or the second edition likely from 1912. This text, which was lavishly illustrated for its time with photographs and drawings, also went to a fourth edition in 1921.

Blumgarten, A.S. (1926). *Textbook of materia medica* (4th ed.). New York: The Macmillan Co. [Available Esther Paulson Collection, B.C. HoN Group.]

Blumgarten was a physician in New York. First edition was 1914.

British Columbia Department of Health Services and Hospital Insurance. Division of Tuberculosis Control. (1963). *Tuberculosis practice: A guide for tuberculosis workers*. Victoria: Queen's Printer.

Brown, Amy Frances. (1952). *Medical nursing* (2nd ed.). Philadelphia: W.B. Saunders. (See especially Chapter 31: Nursing in pulmonary tuberculosis [pp. 985-1029]). [Available UBC SoN Archival Collection]]

Amy Brown was associate professor of medical nursing at State University of Iowa College of Nursing. The chapter contains useful bits of history regarding the introduction of TB services in the U.S. For example, the first state-run Division of TB was in Ohio in 1913; there was no federal body until 1944, when the Tuberculosis Control Division of the United States Public Health Service was established. The chapter is a thorough review of the care of TB at the end of our research period.

Burton, A.H.G. (c1914). *The tuberculosis handbook for health visitors and nurses* London: The Scientific Press.

The author was a physician, the text was British, but this was recommended in the January 1915 issue of *The Canadian Nurse* in a column on "The Nurse's Library."

Cady, Louise Lincoln. (1961). *Nursing in tuberculosis* (2nd ed.). Philadelphia: W.B. Saunders.

Cohen, Felissa Lashley, & Durham, Jerry D. (1995). *Tuberculosis: A source book for nursing practice*. New York: Springer.

The authors are both nurses and have written separately and together on HIV/AIDS. Cohen, a noted U.S. nursing author, is professor and head of the Department of Medical-Surgical Nursing, College of Nursing, and head of the medical-surgical department at University of Illinois Hospital, Chicago. Durham is at Indiana University School of Nursing, Indianapolis. The book is an update on TB after years of no nursing texts on the subject. An interesting quote from the book: "TB and HIV like to hang out together and they're a bad influence on each other" (p. 43).

Division of Tuberculosis Control. Department of Health Services and Hospital Insurance, British Columbia. (1963). *Tuberculosis practice: A guide for tuberculosis workers*. Victoria: Author.

Forward by Dr. G.F. Kincade, provincial director, Tuberculosis Control, B.C. This TB handbook contains an excellent overview for the end of the period, with some small snippets of history.

Dock, Lavinia L. (1900). *Text-book of materia medica for nurses* (3rd ed.). New York: G.P. Putnam's Sons. [Available Esther Paulson Collection, B.C. HoN Group.]

The first edition was 1890. Dock is one of the extremely well-known early nursing leaders and educators in the United States.

Foote, John. (1919). *State board questions and answers for nurses: Being the actual questions submitted at the examinations of 31 state examining boards for nurses, with answers* (2nd ed.). Philadelphia: J.B. Lippincott Co. [Available VGH SoN Alumnae Archives]

This text was one of a series of about 17 Lippincott nursing manuals used in the period. The first edition was published in 1917. The physician who compiled and edited the text was on the faculty of the Georgetown University medical school, Washington, DC. One section of the book pertains to contagious diseases generally, including pulmonary TB, and other sections, such as dietetics, also focus on TB. The text was widely used in Canada.

40, by George! [c1992]. Vancouver: George Pearson Hospital.

A 24-page illustrated booklet commemorating the 40th anniversary of the opening of Pearson Hospital. George S. Pearson (1880-1966) was B.C. minister of health from 1946 to 1950 during the introduction of hospital insurance. The booklet contains some excellent historical background

on the hospital, although it has more on polio because TB was being brought under control. It includes a photograph of showing Esther Paulson and three other nurses on the early TB ward.

Frost, Harriet. (1939). *Nursing in sickness and in health: The social aspects of nursing*. New York: Macmillan. [Available UBC Woodward Library WY100 F76]

The author, a nurse, was director of a hospital school of nursing and of public health in New York city. This text offers a chapter (VIII) on what it means to a family to have TB, indicating the increased nursing emphasis on community aspects of nursing care, importance of early case finding, and involvement of nurses to do such case finding. As well, it describes the need for nursing involvement in helping the family in economic straits and in rehabilitation. Other information on TB is also included. Mention is made of the problem of gaining admittance to TB care – at least in the U.S. – and that care could be initiated at home while the patient was awaiting a bed.

Gardner, Mary Sewall. (1926). *Public health nursing* (2nd ed.). New York: Macmillan.

Gardner, Mary Sewall. (1936). *Public health nursing* (3rd ed.). New York: Macmillan.

Goodnow, Minnie. (1916). *First-year nursing: A text-book for pupils during their first year of hospital work* (2nd ed.). Philadelphia: W.B. Saunders. [Available UBC Woodward Library WY100 G663]

The first edition, by this well-known nurse author, was in 1912. This text contained little of value related to TB. For example, the sections on personal hygiene seemed more concerned with appearance than with protection from infection, but it illustrates something of the teachings of the time.

Grygier, Pat Sandiford. (1994). *A long way from home: The tuberculosis epidemic among the Inuit*. Montreal & Kingston: McGill-Queen's University Press. [Available BC CP&S Library WF300 G79L 1994]

Haagensen, Cushman Davis. (1943). *A hundred years of medicine*. New York: Sheridan House. [Available Woodward WZ40 L56]

A standard medical history text, but with a major section on TB.

Hadley, Wilfred J. (1902). *Nursing: General, medical, and surgical, with appendix on sick-room cookery*. London: J. & A. Churchill. [Available VGH SoN Alumnae Archives]

The author was a physician and pathologist and the book is based on his lectures at the London Hospital Nursing School. The book is English and may not have been used widely in Canada, but it does contain a section on TB (phthisis) describing the treatment regime of the time (rest, climate, and nursing care). No mention is made of interventions such as pneumothorax. The treatment of putting an ice bag on the chest when there was hemoptysis was described. [Note that this practice continued at least until the late 1930s.] The practice of giving ergot or turpentine was

questioned in this text, but the use of opium to calm the patient [and nurse] and check the cough was recommended.

Quote: "**The antiseptic treatment** [bold face in original] has been much used in cases of phthisis. Creosote and other antiseptics have been administered internally with benefit. It is not that they kill the germs of the disease, but it is probable that they prevent their free growth and multiplication, and so give a better chance of the disease becoming arrested" (p. 111).

Hampton, Isabel Adams. (1893). *Nursing: Its principles and practice for hospital and private use*. Philadelphia: W.B. Saunders. (Facsimile edition, 1993)

This was the first nursing textbook published by Saunders. Hampton, later Hampton Robb, was a Canadian who became an extremely well-known nursing leader and educator in the United States. She was the founding principal of the School of Nursing at Johns Hopkins Hospital, Baltimore, and was the first president of the Society of Superintendents of Training Schools for Nurses. She also was the first president of the Nurses' Associated Alumnae of the United States and Canada, the forerunner of the American Nurses Association and the Canadian Nurses Association.

Hampton Robb, Isabel. (1910). *Nursing: Its principles and practice for hospital and private use* (3rd ed.). Toronto: J.F. Hartz.

A later Canadian edition of the above.

Harmer, Bertha, & Henderson, Virginia. (1939). *Textbook of the principles and practice of nursing* (4th ed.). New York: Macmillan. [Available VGH SoN Alumnae Archives]

The first edition of this text, published in 1922, was written entirely by Harmer, a Canadian. After working in the United States for many years, she became director of the McGill University School for Graduate Nurses in 1929. The textbook described here was also in editions in 1928 and 1934. The 4th edition, published after Harmer's death was extensively revised by Henderson and may be the first time she was involved. The texts were used extensively across North America and were standard texts in Canadian nursing schools. Although there is not much in the text about TB, the text was organized around nursing principles rather than medical conditions. As with other nursing texts of the time, it devoted a considerable portion to prevention of the spread of disease in hospitals and asepsis generally.

Hetherington, H.W., & Eshleman, Fannie. (1941). *Nursing in prevention and control of tuberculosis*. New York: G.P. Putnam's Sons. [Available Woodward WY163 H47]

A general TB text for nurses, stressing the control of TB as a family disease and a public health problem. Eshleman was supervisor of nurses at the Henry Phipps Institute, University of Pennsylvania, and lecturer in the department of nursing. Hetherington, a physician, was with the same institutions.

Hill, Hibbert Winslow. (1919). *Sanitation for public health nurses*. New York: Macmillan.

The introduction to this text, by Mary Sewall Gardener, RN, notes that the development of public health nursing in the U.S. had created a demand for literature, so this book was one of a series for the developing post-graduate courses in PHN. The author, formerly a medical officer of health in London, Ontario, was executive director of the Minnesota Public Health Association, the first, full university nursing program in the U.S.A. Dr. Hill, a physician and bacteriologist, came to UBC in 1925 to become nominal head (over Ethel Johns) of the UBC nursing degree program after the death of Dr. R.H. Mullins.

La Motte, Ellen N. (1915). *The tuberculosis nurse: Her functions and her qualifications: A handbook for practical workers in the tuberculosis campaign*. New York: C.P. Putnam's Sons. [Facsimile Edition, 1985, *The history of American nursing: A Garland series*, edited by Susan Reverby. New York: Garland Publishing.]

This was the first text for a "specialized" TB nurse, by a nurse who was one of the first to specialize in TB work. She began in 1905 as a field nurse of the Visiting Nurse Association of Baltimore and was later the organizer and director of the TB Division of the Baltimore Health Department, which by 1915 had a staff of 17 special nurses. The text describes how to organize a unit and "the nurse's part in the anti-tuberculosis campaign" (p. xvi). When the Baltimore Health Department put its emphasis on case-finding, the mortality rate dropped. For example, there were 1400 deaths in 1909 and 1129 in 1913. La Motte states that there was an associated decline in morbidity. "Fewer people die and fewer are infected" (p. 282). The book was recommended in the December 1915 issue of *The Canadian Nurse* in a column called "The Nurse's Library" (*TCN*, 11 (2), p. 642).

Longhurst, Grace M., in collaboration with Lincoln, N. Stanley, & Douglas, Richmond. (1947). *Tuberculosis nursing* (2nd ed.). Philadelphia: F.A. Davis. [Available Esther Paulson Collection, B.C. HoN Group.]

Longhurst was superintendent of nurses at Mount Morris Tuberculosis Hospital, Mount Morris, New York. First edition was 1941.

McIsaac, Isabel. (1907). *Primary nursing technique for first-year pupil nurses*. New York: Macmillan Co. [Available VGH SoN Alumnae Archives]

The author is a U.S. nurse. This is a basic text for junior nurses, with some introductory information about asepsis, handwashing, care of utensils. TB is mentioned only briefly, but a couple of examples illustrate the kind of treatment routines that were used:

"Cod liver oil inunctions [medication absorbed through the skin] are sometimes ordered for ... tuberculous patients who are much emaciated. ... With the tuberculous patients the axillary spaces and inner surface of arms and legs only need to be rubbed" (p. 102).

"Of the fluids given hypodermically [to patients needing quick relief where oral ingestion was contraindicated], the most common are brandy, whiskey, ether, aromatic spirits of ammonia, and normal salt solution" (p. 103).

Maxwell, Anna Caroline, & Pope, Amy Elizabeth. (1923). *Practical nursing: A text-book for*

nurses (4th ed.). New York: G.P. Putnam's Sons. [Available Esther Paulson Collection, B.C. HoN Group.]

Both authors were nursing educators and Pope was a prolific writer of nursing textbooks. This was a fairly common textbook in Canadian nursing schools during the 1920s. The first edition was 1907. [Available Esther Paulson Collection, B.C. HoN Group.]

Medical aspects of evacuation days 1942-1946 (New Denver [B.C.] - Slocan). (c1979). Nakusp, BC: Arrow Lakes News. (Available Woodward Biomedical Library Memorial Room M-3000)

A small booklet related to the Japanese Internment Camp at New Denver, B.C., and the health care given there.

Nobbs, Rudy M. (1998). *Revelstoke: History and heritage*. Revelstoke: Author.

Pfefferkorn, Blanche, & Rottman, Marian. (1932). *Clinical education in nursing*. New York: Macmillan. [Available VGH SoN Alumnae Archives]

The book is based on a research study carried out at Bellevue Hospital by an NLN research director (Pfefferkorn) and the principal of the Bellevue School of Nursing. The study identified a number of problems related to nursing education. Among those relevant to TB was a comment related to the "phobia" among student nurses concerned with getting TB. Quote: "A study made of a large group of students in the Bellevue School of Nursing revealed that at least 65 per cent were positive in a Mantoux reaction. Statistics of the Oslo study [Heimbeck, Johannes. Tuberculosis infection. *Archives of Internal Medicine*, 47: 901-916. June 1931] revealed that all students gave a positive reaction after three years in a nursing school, and that a cross section of the Oslo population disclosed the fact that a positive reaction was given by 100 per cent of those tested over 40 years of age" (p. 112). The interpretation we draw from this is that exposure to patients with undiagnosed TB but with positive sputum would put students at high risk. This textbook indicated that students should have teaching about TB *early* in their courses to help protect them. This book also outlines what should be taught about TB. Four weeks TB experience was recommended, with concurrent lectures, including stress on aseptic techniques. Pneumothorax is mentioned as a treatment option at this time.

Pirie, Peter F. (c1975). *The stump ranch*. Victoria: Morriss Printing.

Pirie worked as a young man at the Coqualeetza Residential School; this is his biography. It contains some background on the school and a few mentions of the hospital and its staff.

Ruddock, E. Harris. (1891). *The diseases of infants and children and their homeopathic and general treatment* (5th ed.). London: The Homeopathic Publishing Co. [Available GZ Collection]

An early medical and nursing textbook by a well-known British author.

Ungvarski, P.J., & Staats, J.A. (1995). Clinical manifestations of AIDS in adults. In J.H.

Flaskerud & P.J. Ungvarski, *HIV/AIDS: A guide to nursing care* (pp. 81-133, esp. 108-112). Philadelphia: W.B. Saunders.

Watson, J.K. (1905). *Handbook for nurses* (3rd ed.). London: Scientific Press. [Available GZ Collection]

An early nursing textbook by a well-known British physician. This gives fairly detailed information on TB treatment.

Weeks-Shaw, Clara S. (1901). *Text-book of nursing for the use of training schools, families, and private students* (2nd ed.). New York: D. Appleton and Co. [Available GZ Collection]

An early nursing textbook in the U.S. by a nurse. First edition was 1885. This provides information related to TB treatment at the time.

Wolf, M.S. (1930). *Principles of surgery for nurses*. Philadelphia: W.B. Saunders. [Available UBC Woodward Library WY161 W67]

This text, by a physician, describes the surgical treatments of the time for TB, including the problems of anesthesia for TB patients.

ARTICLES (Some are annotated, especially if they are selected references)

Alterio, Rita. (2005a, February 9). Rotary International celebrating 100 years 1915-1925. *The NOW Newspaper*, p. 25.

Alterio, Rita. (2005b, February 12). Rotary International celebrating 100 years 1925-1935. *The NOW Newspaper*, p. 25.

Anti-tuberculosis campaign (Editorial). (1911). *The Canadian Nurse*, 7 (11), 561-562. [Photocopy available]

Editorial highlighting the importance of TB to nurses and the setting up of dispensaries in the U.S. (which did not have public health in the same way as Canada).

Baker, [A.H.]. (1922). Tuberculosis training for nurses. *The Canadian Nurse*, 18 (4), 202-207.

This article was a paper read at the convention of the Alberta Association of Registered Nurses in 1921. The article emphasized: "Such a widespread disease as tuberculosis requires expert nursing attention No time should be lost in securing for nurses-in-training both practical and theoretical knowledge of this common disease" (p. 203). Baker went on to say that nurses were afraid of contracting TB when assigned patients known to have the disease; fear of TB was widespread and nurses were not convinced that techniques were effective. He bluntly states that one of every 10 deaths was due to TB and in the age group 15 through 40 years one of every three

deaths was caused by TB.

Baker, A.H. (1930). Tuberculosis and community health. *The Canadian Nurse*, 26 (3), 116-119.

Author is med. superintendent of the central Alberta San. The article was reproduction of a paper read at a joint meeting of AARN and AHA. "Keystone of public health work is prevention." He noted that the death rate in Ontario fell to one-third of what it was at the turn of the century. Alberta death rate in 1929 from TB was 52.8 which was lower than the B.C. figures.

Bibby, B[lanche]. (1933). Sanatorium affiliation. *The Canadian Nurse*, 29 (2), 91.

Author is matron at Tranquille and tells of the affiliation with B.C. nursing schools which began in 1931. The course was two-months long and the San took about 9 to 13 students at a time, usually from third year.

Calhoun, Eva D. (1922). Public health activities in the province of British Columbia. *The Canadian Nurse*, 18 (6), 334-341.

Mrs. Calhoun was a registered nurse with the VON and the article outlines all the public health services provided in B.C. in 1922. It mentions a shortage of trained public health nurses. The Provincial Board of Health had opened up various districts, including Duncan, Keremeous, Vernon, Vanderhoof, and Kelowna. The VON branches were in Vancouver, Victoria, Burnaby, New Westminster, North Vancouver, West Vancouver, Saanich, and Metchosin.

Centers for Disease Control. U.S. Department of Health and Human Services. Public Health Service. (1993). Tuberculosis control laws -- United States, 1993: Recommendations of the Advisory Council for the Elimination of Tuberculosis (ACET). *Morbidity and Mortality Weekly Report*, November 12, 1993, 42 (RR-15), i-28.

Indication of the increased interest in TB, with many new recommendations, especially regarding mandatory reporting and mandatory "isolation" (in the home) of infectious cases.

Chapman, Simon. (1995, December 23-30). Great expections! The decline of public spitting: Lessons for passive smoking. *British Medical Journal*, 311, 1685-1686.

Committee on Public Health Nursing of the C.N.A. (1917). Public health nursing department: Notes on public health nursing in British Columbia. *The Canadian Nurse*, 13 (12), 765.

This may have been part of a longer article related to other provinces as well as B.C. The article mentions two nurses employed by the Vancouver Health Department: "Miss Gertrude MacKay, who was engaged in tuberculosis work, and Miss Janet Campbell, a public health visitor. The duties of the latter are to visit and inspect the sanitary conditions of all stores, factories, and public buildings where female help is employed; also to see that the employees are free from any visible skin eruption; to inquire into conditions of labor, as to hours and character of work; to inspect sanitary conveniences for women at the various parks and bathing beaches; to act as Infant Protection visitor;" The article also mentions another nurse, employed by the VON, a Miss Pedden, a child welfare nurse.]

Cornwall, Janet. (1997). Tuberculosis: A clinical problem of international importance. *Lancet*, 350, 660-661.

Cross, Susan. (1991). The Red Cross in Kamloops: Almost 80 years of service. *The Kamloops Daily News*, Oct. 19, 1991, p. B15.

Currey, D.W. (1912). Tuberculosis. *The Canadian Nurse*, 8 (2), 51, 62-64.

This lead article by an Ontario doctor gives some statistics from USA and England. He talks about "spontaneous healing" of TB as fairly common [e.g., the tubercule was encapsulated]. "Creosote is often used, but it upsets the digestion.... Arsenic in the form of Fowler's solution is a splendid tonic, and is used in many cases. Perhaps the best medicine is cod liver oil given in fairly large doses. Succinamide of mercury gr. 1-10 per hypo has been used with variable results" (p. 64). He describes the technique for hand washing: "The hands should always be made aseptic after attending to a tuberculosis patient. Dipping the hands in a 1-2000 solution of bichloride of mercury will not make the hands aseptic. They must be thoroughly cleansed with soap, water, and a nail brush, then well washed in the bichloride solution" (p. 64). He talks about the washing of dishes, noting that they "must be boiled for at least 10 minutes" and about care of excreta [e.g., chloride of lime used in outhouses] and of sputum, recommending burning.

Darlington, Thomas. (1907). The trained nurse as a factor in municipal health work. *The Canadian Nurse*, 3 (9), 405, 472-473.

Author was commissioner of health in New York. Two-thirds of the article relates to TB nursing as part of municipal health work [this was in the early days of city PHN]; the city health nurses would visit and teach patients referred by family physicians and by agencies; to limit the spread, the case was put on the register; the nurse "has proved herself almost indispensable... in combatting and eliminating this dread disease." (p. 472) This article has a good description of the PHN's work.

Dickson, E. McPherson. (1914). The care of tuberculosis children. *The Canadian Nurse*, 10 (12), 771-776.

Author was superintendent of nurses, Toronto Free Hospital for Consumptives, and was president of CNATN 1920-1922. Useful information relates to the careful description of three stages: "incipient, moderately advanced, far advanced." Dickson believed that nurses could do much for the first.

Dickson, E. McPherson. (1927). The tuberculosis hospital and its facilities for teaching public health. *The Canadian Nurse*, 23 (11), 594-597.

Still superintendent at Toronto Free Hospital, plus now has Queen Mary Hospital for Consumptive Children. She stressed that teaching to nursing students should be done in a TB hospital, where the whole gamut of teaching about education regarding TB could be done. She advocated a two-month affiliation for students. (Note that B.C. was the first province to require all its students to have TB affiliation, but not until 1944.)

Dobbie, W.J. (1915). The value of foods in tuberculosis, as related to their cost. *The Canadian Nurse*, 11 (5), 249-254.

Article broke down all the various protein foods that would be useful for TB patients and gave an estimate of cost so that nurses could figure out what to advise their patients to buy depending on income. For example, steak was expensive, milk powder was not.

Dobbie, W.J. (1923). The economics of tuberculosis. *The Canadian Nurse*, 19 (3), 162-165.

Dr. Dobbie was physician-in-chief of the Toronto Hospital for Consumptives. He says that Canada in 1921 had 6,694 deaths from TB, each represented a cost to the community of \$6,345 or a total of \$48.8 million (\$4 million a month).

Dobbie, W.J. (1925). Early tuberculosis in children. *The Canadian Nurse*, 21 (2), 61-64.

Dr. Dobbie is now physician-in-chief of the Toronto Free Hospital in Weston, Ontario. He discussed the need for earlier diagnosis of TB in children since it was now conceded that the majority of cases of TB in adults developed from infections in childhood. He gives statistics to show that by age 15, 75% of children are infected with the TB bacillus, although they may not have the disease. He notes that the presenting symptoms are different in children and clinically present as a disease of lymphoid tissue (e.g., scrofula, spleen, bone and joint involvement).

Enarson, D.A., Grosset, J., Mwinga, A., Hershfield, E.S., O'Brien, R., Cole, S., & Reichman, L. (1995). The challenge of tuberculosis: Statements on global control and prevention (*Lancet* conference). *Lancet*, 346 (8978), 809-819.

"*M. tuberculosis* still accounts for more deaths world wide than any other single infectious agent" (p.816). Article on global perspective.

Fallis, L.C. (1928a). Surgical measures in the treatment of tuberculosis. *The Canadian Nurse*, 24 (12), 649-652.

Fallis, L.C. (1928b). Treatment of pulmonary tuberculosis. *The Canadian Nurse*, 24 (11), 595-597.

Fallis was chief clinician at Queen Alexandra San in Byron, Ontario. A two-part article -- see immediately above.

Ferguson, R.G. (1930). Saskatchewan's place in tuberculosis work. *The Canadian Nurse*, 26 (6), 297-298.

Author is MD, director of medical services for the Saskatchewan Anti-TB League. Saskatchewan initiated many services, such as separation of a newborn infant from its mother at birth to protect it from TB infection. See book on his life, above under Houston.

Ferguson, R.G. (1936). Tuberculosis among nurses. *The Canadian Nurse*, 32 (12), 545-548.

Author (see above) is still MD, director of medical services for the Saskatchewan Anti-TB League. The article notes that a study by Stewart and Ross in 1930 showed that during a four-year period about 6% of pupil nurses became sanatorium patients either while in training or within a year of leaving. He carried out a similar study in Saskatchewan between 1930 and 1935 and found an incidence of 11.47, which is "five and a half times that in the general female population in the age group 20-24 years; and seven times that found among young adult Normal School pupils" (p. 545). He further reports that admissions of school teachers to sanatoria in 1934 was "one-tenth that among nurses-in-training" (p. 545). He looked for a cause for this great difference and the article reports in detail on these findings. Although the two groups had many similarities, nurses were more carefully screened for illness on admission (including "radiographs of the lungs"), probably had better living quarters and better diets, and had access to free medical supervision and treatment. Despite this, the incidence shows this great discrepancy between nurses and teachers. He attributes part of the cause to nursing students being exposed early in their careers without having had adequate instruction in infection control. In his conclusions he called for: "(a) earlier and better instruction in sanitary technique; (b) better and more convenient facilities for hand washing; (c) complete sterilization of dishes; (d) more prompt identification of spreaders among hospital patients" (p. 548) He also recommends the entry age for nurses be set at 25 -- after the age of the greatest susceptibility in females, which he said was age 20-24. The report is interesting and the statistics enlightening, but Dr. Ferguson's conclusions are, at best, suspect in that he ignores the complaints of some of his nurse respondents that hours and work were factors as well. He seems to ignore the probably that student nurses worked long and arduous hours in situations where they were exposed.

Ferretting out tuberculosis [Editorial]. (1925). *The Tranquillian*, 6 (8), 1.

Discusses the value of the visiting nurse and her importance in early recognition and finding of TB.

Fifty years of the Union. (1971, January). *Tuberculosis: Quarterly Review* (Published by International Union Against Tuberculosis, Paris.), pp. 2-7. [Available Esther Paulson Collection, B.C. HoN Group]

Fitzgerald, J. Mark. (1994). The resurgence of tuberculosis. *Future Health/ Perspectives Santé*, 16 (4), 6-7.

Forrest, Ann M. (1931). Increase of tuberculosis among nurses. *The Canadian Nurse*, 27 (11), 578-581.

Excellent article on the incidence of TB in nursing students, which appeared to be increasing. Quotes several other articles by Canadian physicians on this increased incidence. Notes that incidence in young women was higher than for young men, but that nurses had the highest rates of any occupational group, including "school teachers, stenographers, and university women taken together" and noted that "nursing is a far more hazardous occupation than it should be" (p. 580). The article notes that nurses should be receiving teaching about TB and techniques to

protect themselves – something that had not been widely introduced into the curriculums in 1931. There are a few paragraphs related to the financial hardships that befell nurses who contracted the disease. There was no workers' compensation at the time, and the long drawn-out treatment regimes (enforced rest) and long convalescence meant serious financial hardship for nurses.

Fournier, F.G. [Mrs.] (1911). Tuberculosis: Our attitude toward its prevention and cure. *The Canadian Nurse*, 7 (6), 280-281, 288-290.

General article on prevention; indication of the emphasis on TB in the Canadian nursing literature.

Glassroth, Jeffrey. (1997). Vaccines for tuberculosis: The glass remains half empty. *Annals of Internal Medicine*, 127 (5), 403-404.

Grierson, Mary E. (1937). Maple Ridge and Mission District [Report]. *Public Health Nurses' Bulletin*, 2 (4), 20-21.

Contained some TB statistics for the district.

Grzybowski, Stefan, & Allen, Edward A. (1995). History and importance of scrofula (Department of medical history). *The Lancet*, 346, 1472-1474.

An superb historical review of the history and causes of TB cervical adenoiditis (scrofula, from *M bovis*) that indicates that it may have given immunity to pulmonary TB. Interesting closing paragraph: "AIDS will open a new chapter in the story of scrofula. Not only can HIV itself cause lymphadenopathy, but also the loss of immunity allows for both the recrudescence of latent mycobacterial foci in the glands and the acquisition of new infections" (p. 1474). Both authors are professors at UBC and Grzysbowski is Canada's foremost authority on TB in Indians and Inuit.

Harris, Elizabeth E. (1909). A day's work. *The Canadian Nurse*, 5 (3), 123-126.

Article describes the work of a TB nurse with the Ottawa Association for Prevention of Tuberculosis, which was formed in 1905. Interesting information, but mainly Ontario.

Hattie, W.H. (1917). Some medico-sociological problems arising out of the war. *The Canadian Nurse*, 13 (11), 682-689.

In the article, the author mentions the efficiency of the anti-TB measures carried on in England and the colonies but neglected in France. He estimated that soldiers with tuberculosis "are now costing Canada from \$1,200 to \$1,300 a year each" (p.686). The military hospitals planned to provide sanatorium treatment for soldiers with TB – and the author thought this might be the beginning of a national system for control of TB.

Hill, R[obert] H[unter]. 1976. Sunnyhill '76. *B.C. Medical Journal*, 18 (5), 143.

Brief article on the "new" Sunnyhill [sic, but note some earlier histories of the place spell it Sunny Hill], which had become a hospital for chronically disabled children. A few sentences in this one-page article give historical background; Hill was medical director in 1976 and was interested in its history. He notes that Sunnyhill was rebuilt in 1958 as a 70-bed TB hospital for children, but that it was never more than one-half occupied by TB patients. [Thanks, no doubt, to streptomycin!] In 1965, the hospital came under the B.C. Hospital Insurance Services as a rehabilitation hospital for children.

387. Holbrook, J.H. (1912). Tuberculosis from the nurse's standpoint. *The Canadian Nurse*, 8 (7), 382-

Author is MD from Hamilton, Ont. Article directed mainly to nurses working in private homes. Patient's mustaches and whiskers should be clipped, and use of a sputum box insisted upon. Paper tissue handkerchiefs should be used. Stresses teaching about covering of mouth when coughing. When patient moved out, house should be fumigated by the health authorities "free of charge." Floor and woodwork also needs to be thoroughly scrubbed.

Houston, Jean. (1925). The public health nurse in the field of tuberculosis. *The Canadian Nurse*, 21 (6), 307-309.

Author was an RN at the Manitoba Sanatorium and stressed the importance of the PHN in the prevention and finding of TB.

Innis, Hattie B. (1927). The Rotary Fresh Air Camp at Vancouver, B.C. *The Canadian Nurse*, 23 (12), 624-625.

Author was the superintendent of the camp, which was to provide an atmosphere for healthy living and education. Situated on Marine Drive, it was open for 2 1/2 months in the summer and accommodated 36 children (18 boys, 18 girls) ranging in age from 4 to 16 years. The children were TB contacts, TB suspects, and underweight and were selected by the nurse in charge at the Rotary Clinic. Each child stayed 2 weeks, although in special cases this could be increased to up to 4 weeks.

Jones, Agnes. (1924). Health, the neglected factor in world economics, regarding tuberculosis. *The Canadian Nurse*, 20 (5), 268-270.

General article on the effects of TB on the family's income -- and therefore on world economics. The author calls nurses "the philanthropists" in this economic situation, noting that they give themselves "unsparingly" and often contract the disease themselves. The article stresses the need for more education on TB for nurses (students and graduates).

Jones, Edith P. (1906). Our responsibility *re* tuberculosis. *The Canadian Nurse*, 2 (1), 42-44.

Mainly concerns the importance of teaching patients and families. A few interesting items, such as the idea that male patients should not be allowed mustaches, and to teach that TB is curable.

Jones, N[ellie] E. (1939). Vancouver Island Unit of Tuberculosis Control [Report]. *Public Health Nurses' Bulletin*, 2 (6), 6-9.

Note that this nurse is identified elsewhere as Nellie Moore Jones. She was describing her work with this unit.

Landry, A.R. (1927). Pulmonary tuberculosis. *The Canadian Nurse*, 23 (11), 591-593.

Paper delivered to N.B. Graduate Nurses' Association describing the principles in cure/arrest of TB (rest, food, fresh air).

Langton, Geraldine, & Chodat, Isabelle. (1943). Planning field experience for a postgraduate course in public health nursing. *The Canadian Nurse*, 39 (11), 739-744.

Langton taught in the UBC SoN and the article relates to the courses there in the early 1940s.

Lloyd, Nancy. (1995). Tuberculosis: The threat lingers. *The Canadian Nurse*, 91 (10), 33-37.

Lucas, C.A. (1923). The Saanich Health Centre. *The Canadian Nurse*, 19 (10), 605-606.

McKenzie, Thelma. (1936). Nursing care in thorocoplasty. *The Canadian Nurse*, 32 (5), 197-201.

The author, an RN at the Royal Victoria Hospital, Montreal, wrote a general article on nursing care in TB.

McLellan, A. (1922). The Canadian Red Cross and its relation to the development of public health nursing in British Columbia. *The Canadian Nurse*, 18 (11), 701-703.

MacLennan, Katherine M. (1934). Progress in nursing communicable diseases. *The Canadian Nurse*, 30 (7), 306-309.

Mieklejohn, M. (1907). Anti-tuberculosis work in Canada. *The Canadian Nurse*, 3 (11), 581-585.

Miller, Naomi. (2003). Invermere and beyond. *History of Nursing News*, 13 (4), 14-18.

Information on Margaret Ashworth.

Mitchell, Christina A. (1907). Chronic tuberculosis. *The Canadian Nurse*, 3 (2), 54-56.

Neilson, Janet. (1910). Special work among tuberculosis patients. *The Canadian Nurse*, 6 (8), 336-338.

Paper read at an annual meeting by a visiting nurse in Toronto who was one of three nurses who did specialist TB nursing among the poor, which included a large immigrant population. "Poverty is perhaps the greatest drawback; ignorance is another, and a deeply ingrained habit of unwholesome and unsanitary living is another" (p. 337).

News Notes: British Columbia. (1929). *The Canadian Nurse*, 25 (11), 684.

Brief note in the news columns on a paper presented at the B.C. Hospital Association meeting. Dr. A.D. Lapp, medical superintendent of Tranquille, pointed out the need for nurses in training to have a two-month affiliation in TB care.

Paulson, Esther. (1989, Spring). Meg Thatcher -- 1892-1987. *Nursing Division Newsletter*, p. 5.

Paulson, Esther, & Kunderman, Eleanor. (1956). Tuberculosis nursing in British Columbia. *Nursing Outlook*, 4 (7), 404-407.

Peters, J.B. [Josephine]. (1932). The travelling chest clinic: Province of British Columbia. *The Canadian Nurse*, 28 (12), 653-654.

Author is listed as from Tranquille Tuberculosis Society, Kamloops. In the fall of 1928, the Tranquille Tuberculosis Society, using funds from the Christmas Seal campaign, purchased a portable x-ray and provided a PHN to assist the Travelling Health Officer. Purpose was to visit smaller centres to find and diagnose TB as early as possible. Peters spent a month at Tranquille getting acquainted with patients and their needs and looking for possible contacts for early case-finding. When the doctor had first started ("some time ago") he held clinics in doctors' offices, but with the travelling clinic, the clinics were held in local hospitals. The travelling nurse took histories, set up appointments for the doctor and for x-rays and wrote up reports. Clinics were held all over BC with exception of Vancouver [where the Rotary Clinic was set up]. Notices were put into the local papers about the coming clinic; examinations were free. At each hospital, all student nurses were x-rayed and as many graduates as possible. Total Examinations (April to March each year): 1928-29 – 991; 1929-30 – 1,779; 1930-31 – 2,323; 1931-32 – 2,950.

Phillips, Ivan E. (1985). Similkameen's first public health nurse. In Okanagan Historical Society, *Okanagan history: 49th annual report*. [Kelowna: Author.]

Preventorium vs. TB ... A look at the past. (c1974). In *Sunny Hill Hospital for Children* [pamphlet]. Vancouver: Sunny Hill Hospital. (Available BC CP&S Library in Vertical Files labelled "Organization Files.")

One page in the pamphlet contains a brief history of the Preventorium. Photo (n.d., no source) shows a bus and children waving flags; likely from late 1940s or early 1950s.

Rawlings, H.A. (1927). Rotary Institute for Diseases of the Chest. *The Canadian Nurse*, 23 (12), 623-625.

Describes Vancouver's Rotary Clinic, established in 1918, which operated by municipal grants and offered free treatment, essentially for diagnosis of pulmonary TB. About 20-25% of all new cases examined were TB (others such as neoplasms, asthma, bronchitis). There were two nurses in addition to the medical director and a technician. TB field nursing was carried out by two district nurses (who had automobiles); these two nurses made 4,816 visits during 1926, including 648 requiring bedside care. The Rotary Fresh Air Camp is also mentioned in this article; it was maintained entirely by the Rotary Club (no grants) and was a summer camp for children from homes in which there has been TB (although the children did not necessarily have TB).

Reichman, Lee B. (1996). How to ensure the continued resurgence of tuberculosis. *The Lancet*, 347, 175-177.

Notes WHO declared TB "a global emergency" in March 1993. This article pans the U.S. government's use of "block grants" to Public Health instead of grants specifically targeted for TB control.

Reid, Mildred. (1931). Suggested curriculum for schools of nursing in Canada: Section III. *The Canadian Nurse*, 27 (11), 586-587.

Recommended three hours out of 81-87 hours in second year be devoted to TB.

Renton, [Miss, No initials]. (1912). Dispensary and work among down-town tuberculosis patients. *The Canadian Nurse*, 8 (7), 374-375.

Paper presented at annual meeting of CNATN. Interestingly, the word "dispensary" is used, but there is nothing in this short article that explains this. However, she does talk about a "fund" provided by Miss Dolittle which supplied families with a daily allowance of milk and, sometimes, meat, fish, eggs, etc. The article also mentions funds from "the Billiken club," so it appears these dispensaries were funded by private donation. Needs further exploration.

Richardson, Sharon. (1998). Political women, professional nurses, and the creation of Alberta's district nursing service, 1919-1925. *Nursing History Review*, 6, 25-50.

Robertson, Marjorie. (1934). The tuberculosis contact. *The Canadian Nurse*, 28 (4), 165-167.

The author, an RN at the Royal Ottawa Sanatorium, wrote a general article noting nurses are in a good position to find TB early and to educate the public.

Ross, E.L. (1930). Tuberculosis in nurses. *The Canadian Nurse*, 26 (6), 283-289.

Author (MD) was an assistant superintendent of the Manitoba San. Article is a study of the disease in 60 nurses and nurses in training admitted to the Manitoba San. during 1925-1930; this is "far beyond the proportion in which women of the province in general or any other class of

women has been admitted, and more than the proportion of girls of their average age" (p. 287). "These nurses, who have come for treatment of tuberculosis, have with very few exceptions broken down during their training in general hospitals or during the first year after that training, often while still on staffs of general hospitals. ... An unfavourable condition in all general hospitals, we consider, is the presence of patients who are under treatment on account of special illnesses and needs ... who have general chronic disease as well, which is not always enquired into, and which may be and often is at an infective stage" (p. 288). "General hospitals could be made more safe for their nurses. *All patients entering general hospitals should have a thorough history taken and a complete physical examination* [italics in original]" (p. 288). He goes on to say that student nurses need to be taught about TB and about essential measures for prevention of spread of infection, especially through coughs. He specifically mentions disposal of sputum and patient teaching (e.g., about having patients cover mouths).

Sanderson, Kathleen I. (1934). The Greater Vancouver Health League. *The Canadian Nurse*, 28 (2), 72-73.

The author was an RN and Executive Secretary of the League, a voluntary organization for the "purpose of awakening the public to the necessity of the prevention of all preventable diseases." The League had an active TB committee since 1932 to stimulate action on TB.

"A serious menace" [Editorial]. (1936). *The Canadian Nurse*, 32 (12), 551.

Unsigned editorial by Ethel Johns referring readers to the article by Ferguson (q.v.) in the same issue and noting that this had been presented at the CNA's biennial meeting.

Shaw, Madeline. (1909). The visiting nurse. *The Canadian Nurse*, 5 (1), 11-20.

Smith, May Buckingham. (1990a). My experience with the Red Cross nurse. *Schuswap Chronicles*, 3, 39-40. (Celista, BC: North Schuswap Historical Society.)

Smith, May Buckingham. (1990b). The history of the Red Cross nurses in B.C. *Schuswap Chronicles*, 3, 38-39. (Celista, BC: North Schuswap Historical Society.)

Snider, Gordon L. (1997, February 1). Tuberculosis then and now: A personal perspective on the last 50 years. *Annals of Internal Medicine*, 126 (3), 237-243.

Snider was a physician at the Trudeau San at Saranac Lake in the late 1940s. He notes some of the controversy over the "sunshine" cures popular in the 1920s but frowned upon in the 1950s. Guinea pig inoculations were used to identify positive/negative sputum. He also outlines much of the treatment procedures of the times just before "the miracle of the empty beds" (Wherrett, 1977). Snider says that Western society discarded the proven public health surveillance/ treatment (isolation) measures when anti-TB drugs came on the scene and notes that in the early 2000s society may once again need to resort to a fight against TB.

Stewart, D.A. (1909). What a nurse should know about tuberculosis. *The Canadian Nurse*, 5 (11),

681-687.

Author was superintendent of the new TB San (Ninette) in Winnipeg.

Stewart, David A. (1927). The sanatorium: A university. *The Canadian Nurse*, 23 (5), 239-240.

Stringer, Bernadette. (1995). Reducing the occupational risk of TB. *The Canadian Nurse*, 91 (10), 27-32.

Toth, Anita, Fackelmann, Janice, Pigott, Wendy, & Tolomeo, Ornella. (2004, November). Tuberculosis prevention and treatment. *Canadian Nurse*, 100 (9), 27-30.

Trout, Ferne. (1945). Tuberculosis affiliation course. *The Canadian Nurse*, 41 (6), 451-454.

B.C. Division of TB Control had established an affiliation course for nursing students, which began in 1944. The five-week course (later six) was given at the Vancouver unit of the Division (Willow Chest) and was designed to accommodate as many nursing students as possible. This course later became the base for provincial TB affiliation. Hatfield's *Handbook* (q.v.) was the text. Trout noted that nurses were reluctant to work in TB nursing, but with the affiliation it was expected that it would be easier to recruit nurses for TB work.

Tynes, L. Lee. (1993). Tuberculosis, the continuing story [CD-ROM]. *Journal of the American Medical Association*, 270, 2616-2617. Full text from: Health Reference Centre July '92-July '95.

U.S. Department of Health and Human Services. Public Health Service. Centre for Disease Control. (1995, Sept. 8). Essential components of a tuberculosis prevention and control program: Screening for tuberculosis and tuberculosis infection in high-risk populations: Recommendations of the Advisory Council for the Elimination of Tuberculosis. *Morbidity and Mortality Weekly Report*, 44 (RR-11), 1-34.

Upton, E. Frances. (1927). Tuberculosis nursing in sanatoria. *The Canadian Nurse*, 23 (5), 243-246.

The author was superintendent at a San in Quebec and described a course for nurses given there, and urged schools of nursing to include TB nursing in their curricula. She noted there was shortage of nurses prepared to work in TB.

Von Eberts, E.M. (1909). Surgical tuberculosis. *The Canadian Nurse*, 5 (5), 239-243.

Not a terribly useful article, but does deal with care post-surgery of bone TB.

Vrooman, C.H. (1919). Relation of hospitals to treatment of tuberculosis (pp.133-137). In British

Columbia Hospital Association, *Report of proceedings of the second annual convention of the hospitals of British Columbia*. Vancouver: Author.

Dr. Vrooman was at this time medical director of the Rotary Institute for Chest Diseases, Vancouver. In this presentation to the BCHA, he argued for more beds for people with TB, both in hospitals and in sanatoria. His estimate was that 300 beds were needed in the province. Hospitals should get the far advanced and dying patients; sanatoria should get the ones for whom there was some hope for an arrest in the disease.

Wace, C. (1927). Queen Alexandra Solarium. *The Canadian Nurse*, 23 (5), 241-242.

Describes the Queen Alexandra Solarium near Victoria.

Watson, [Miss, No initials]. (1912). How every nurse can help eradicate tuberculosis. *The Canadian Nurse*, 8 (7), 371-374.

Probably a paper presented at an annual meeting and reprinted in the journal that stated that prevention was vital. "Prevention ... is taking place every day in our schools since the advent of the school nurse, but there is still plenty of scope for the private nurse in the home" (p. 373). Talks about spitting.

Wood, E. Winnifred. (1935). Ultra-violet light in a health programme. *The Canadian Nurse*, 31 (5), 205-206.

Author was from the Vancouver General Hospital, where there was an 8-cot treatment room (a "solarium") where students and staff nurses could elect a month-long daily "treatment" by exposure to quartz-lamp ultra-violet light [in other words, a "tanning salon"]. Initial doses were 1 minute back and front, but this was increased to a maximum of 10 minutes each side. The idea was to reduce the number of colds and thereby sick time. About 100 nurses could be treated each day, Monday to Friday. The programme was run by a "trained physio-therapy technician" (p. 205)

Yang, T.C., Taylor, Greg, & Holton, Donna. (1995). Controlling tuberculosis -- What should be done? *Germes & Ideas*, 1 (1), 27-33.

Canadian article on the increasing incidence of TB in the 1990s with interesting and relevant statistics, such as 53% of TB cases in Canada are in the foreign born, and Asian immigrants account for 30% of total TB cases reported.

Zilm, Glennis, & Warbinek, Ethel. (1995). Early tuberculosis nursing in British Columbia. *Canadian Journal of Nursing Research*, 27 (3), 65-81.

Article describing the first phase of our historical research project.