

A NUN FROM QUÉBEC, A MÉTISSE FROM GOOD HOPE, AND A GWICH'IN FROM PEELS RIVER: THREE WOMEN'S STORIES OF SICKNESS IN THE MACKENZIE DISTRICT (1909–1925)

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ABSTRACT

This article outlines the stories of three women religious who lived and worked in the McKenzie Delta, in the Arctic region of the far north of Canada, in the nineteenth century. Their service took place in the context of the spread of tuberculosis. Close archival work details their response to the illness and death around them, and the suffering it entailed. An Appendix is included to give indication of the differences between the work of the missionary sisters and the physicans in the paid employ of either the North-west Mounted Police or the federal government.

Keywords

Grey Nuns, Mackenzie Delta, Missionary Oblates of Mary Immaculate, Canada, Arctic, nineteenth century, tuberculosis, health care

*Imprimi Potest*¹: An Introduction

Via three early-contact twentieth century Mackenzie River women, this essay joins the recent increase in study of patients, nursing, and emotions. It differs, however, in making tuberculosis (tb), then known as consumption, the prime vector of events. Changes wrought over hundreds of years since first arrival of whites had spiralled its spread and death; once it had control, neither housing, reservation or school oversight, nor isolation, medication, or surgery could change events. And that makes retrospective litigation and ironic historiography (blind, uncaring, hurtful, genocidal whites) irrelevant. What archives “tell” differs from what a bacterium brought about.

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1. Until recently North American books under Catholic auspices showed three fly-leaf authorizations: *Nihil Obstat*, *Imprimi Potest* (“it can be printed,” by censor), and *Imprimatur* (Duchaussois 1937, 1959 for example,). This essay should have as heading the equivalent of “it must be printed.”

*Sr. Ste-Eugénie,
Prelude*

“The mouth smiles while the heart sheds tears”: A Fort Providence Grey Nun’s care of ailing Dene children (1915–1918)

Sr. Ste.-Eugénie’s story depicts her initial three years in the North as superior and nurse at the Fort Providence (Zhahti Koe or Zhahti Kue) Grey Nun Convent. At once orphanage, residential school, novitiate, infirmary, hospital, and home for destitute and ailing elders, it served Dené and Métis as far north as Fort Good Hope (K’asho Got’ine) and Arctic Red River (Tsiigehtchic). Students numbered around sixty, half quite young, and student-staff ratio (including priests and brothers) was near four to one.

Since little was known about consumption’s natural course, Sr. Ste-Eugénie was in the dark except for two dynamics: its link with native hunger and poverty (Feldberg 1995) and that God decided which children to take.

When the sister’s anguish rose, metaphor and poets’ lines assuaged it, but with a twist: soft phrasing signalled seething anger. What she penned in the Fort Providence *Chroniques*, the convent’s daily journal, was certain one day to be read by a visiting upper-hierarchy nun.² Mention of fatigue, disappointment, or dismay would bring critique; only lofty thought and praise of God must show.

Time ran short in 1915 as she taught students, made house-calls, saw outpatients, admitted serious cases, oversaw the raising of orphans and feeding of priests and brothers (Oblates of Mary Immaculate), and filled the needs of Dene camped beside the Hudson’s Bay Company (HBC) store. Fall mail brought a virus, raising her load. Only rarely did a doctor visit.³

Early the next year she could hardly keep up. Tuberculosis students had to be watched, the chaplain fell ill, a trapper was wounded, and families were struck by flu (PC 1916, January 10, 11, 14, 17, 19, 23; February 2, 12, 16). Keeping up her spirits was a priest who had come from France to write about nuns. Pierre Jean Baptiste Duchaussois, thirty-seven years old

2. In November of 2018 the Montreal Grey Nun Mother House chief archivist advised such inspection would never occur.

3. DIA employee Dr. McDonald settled at Fort Smith in 1913, anticipating a Grey Nun hospital the next year. It was “a physical impossibility for Dr. MacDonald [...] to visit with any degree of frequency such posts as [...] Fort Providence” (federal official in Fumoleau 1973, 114). His Ft. Providence stays, gathered from PC: August 16–22, 1913; July 9–19, 1914; no visit in 1915; June 26, 1916, a few hours; no visit in 1917; August 4, 1918 overnight; September 15–16, 1918 when he operated on a sister (she died a few years later) and performed a tonsillectomy on a girl who reacted badly to chloroform.

during his stay in Fort Providence, but he departed after twelve months. “A little death,” Sr. Ste.-Eugénie called his departure: “*RP Duchaussois nous quitte [...] nous nous sentons tristes. Partir c’est mourir un peu dit un poète [...] et nous le sentons bien*” (PC 1916, March 23). Days later the passing away of a young student, Marie-Adèle, made her think of Chateaubriand’s “need to fall on one’s knees when unhappy”⁴ for grace and forgiveness (PC 1916, March 24, 26, 29).

Oblates in April caught a nasty infection, many Dene came for help, and an elderly woman, deaf, blind, and sick, entered “*l’hôpital*” (the infirmary). Forays to local homes continued, and ailments among students rose. The mission bell’s pre-Easter silence⁵ fit her sombre mood (PC 1916, April 8–9, 20, 24–26, 30).

Two girls, Marie-Anne and Thérèse, received the last rites after failing to respond to sunlight,⁶ as did a boy, David (PC 1916, May 12, 26–31; June 1–2, 4–5, 10, 12–13, 17). “Life is full of sadness,” Sr. Ste.-Eugénie wrote, “yet no one wants to leave it,” adding that “it’s not a matter of living long so much as living saintly” (PC 1916, June 12). At first glance this speaks of her patients, but might it, though obversely, signal her own wish for an end to mortal existence? Did the youngsters’ looming death sting more than she could bear? Subsequent words feed this perception.

Kept awake by pelting rain and trying to strike a high note, she recalled Saint Thérèse’s view of life as a stormy night in a tawdry inn, “when one finds in that lodging not only friends but obedient, pious, and loving children,” complaint was out of the question (PC 1916, June 18).

Clear weather brought no cheer, since she knew pleasant things would not last (PC 1916, June 16). “My God!” she cried as Thérèse and David left this world, “since we must witness such deaths, how good it is—how necessary it is—to believe that one day we will see them again in another life” (PC 1916, June 20–22).

Dogs killed her cat shortly after, grasshoppers ate the vegetable crop, boats brought disease, Dene and Oblates again clamoured for aid, students became so ill “as to evoke pity,” and she herself felt sick in body and heart. Appeal to St. Roche through an outdoor procession (from convent to fort and back) brought no help. Within hours little Jean, about to go home to his parents’ camp, showed signs of peritonitis. “Again, my Lord!” she

4. “*Les souffrances prient,*” a dit Chateaubriand, “*on sent le besoin de tomber [...] sur genoux quand on est malheureux et l’on prie pour demander grâce et pour obtenir miséricorde*” (PC 1916, March 24, 26, 29).

5. Silent Week, to mark Christ’s suffering.

6. Prior to the discovery of antibiotic drugs effective for tuberculosis, exposure to direct sunlight was thought to be the optimal therapy. Hence sanatoria’s large verandas.

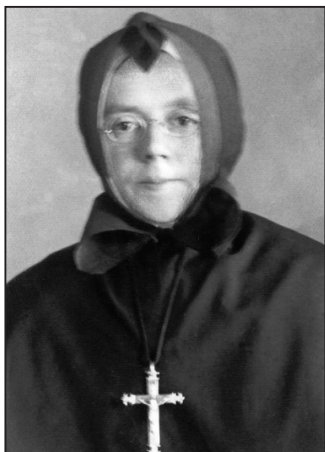


Figure 1: Sr. Ste.-Eugénie

cried at his burial, “too much all at once!!!,” but she carefully added: “thy will be done” (PC 1916, June 24; July 1–18).

As consumption thinned young student Augustin, and abdominal cramps struck Sr. St.-Yves, a convent mainstay, Sr. Ste-Eugénie longed to tell the soon-expected Mother Superior, head of the Grey Nun's Divine Providence province, which included the Mackenzie. It would be like pouring overflow into a second vessel—but she was not on the steamer when it arrived (PC 1916, July 16, 18–19, 21–22).

Parsing the sister's lines a century later, we see weariness in the repetition: “to dry a tear, to draw a smile; pleasures one can readily procure” (PC 1916, August 13) and, at Augustin's death: “when the mouth smiles, the soul is shedding tears” (PC 1916, July 9).

What also drained was “exile” from home and ties in Montreal. Support was much needed, since Sr. Ste-Eugénie's fervour was gone. “We too, Oh! Jesus, want to be healed” she prayed, after a sermon about His making lepers' sores vanish. But a chance meeting with a favourite former student, now deranged, showed the rough road ahead: “alas nothing offers peace, nor is there anything of which one can be certain. Only in heaven will it be better” (PC 1916, September 2, 10, 21).

Lacking wings that had once marked her happiness, she could not respond to migrating geese calling to join them. How fortunate those travellers with all that air and light! They packed with ease, brought no baggage, and God paid their hotel, while humans below stayed confined in cold walls. Mail brought only letters for another sister (PC1916, September 23; October 16; November 22).

At onset of the year's darkest month two small boys, Alphonse and Lazare, rapidly sank. “Must we really open still more graves?” was her terse response. But she knew God measured each person for a coffin; her patients had grown to the pre-ordained length of theirs (PC1916, December 9, 11, 21).

When Alphonse joined his maker, she put Lazare in a bed beside her own. One morning he told her to stop fussing over him and run to breakfast: late arrival, he worried, would mean she'd get none. The sudden awareness, however, was deceptive, for at her return he breathed no more. “We don't want to complain,” the nun told her Lord, “but we know you are a good father, so please listen to our sighs and give us the grace of

resignation” (PC 1917, January 8–10, 26). What she meant was “Please stop the killing.”

Yet no written lament appeared after heartbeats stopped in little Joseph, who next stayed by her bed (PC 1917, May 1, 4, 10–12, 13, 17). Rest had increased (no others lay seriously ill, house-calls dwindled, Dene had left for distant camps), so resentment stayed in check. It also helped that the Very Rev. Mother Superior M. A. Piché finally came from Montreal to celebrate the convent’s golden anniversary with banquets and student pageants. More than ever Sr. Ste.-Eugénie felt ties to founder Marguélite d’Youville, on whose birthday a candle was lit by her statue in the private parlour. Its brightness (if we believe the *Chroniques*) showed what all present sought: to labour hard until joining her in the hereafter (PC 1917, July 3–4, 11–13, 20; October 17).

Pierre Andrew died in March 1918, Émile in July, and little Marguélite seemed about to follow, yet Sr. Ste.-Eugénie posed no question. It helped that an Oblate, Father Leguen,⁷ spoke of the Virgin’s obedience and conception during Archangel Gabriel’s⁸ earthly passage (PC 1918, March 8–9). As well, Montreal news of fifty infants’ demise in an arsonist’s Grey Nun building fire gave perspective—compared to that toll, Fort Providence deaths were few. Nevertheless, the sister’s comment, “life escapes painfully, drop by drop,” applied even more so to her own young patients (PC 1918, April 22; July 1). She would be, those words predicted, still further tested.

When a virus again swept the Mackenzie, it killed a former *grande*’s infant on whom Sr. Ste.-Eugénie had doted. Sr. Yves’s cramps again became a problem. Then Elisabeth Ethchi, a young student, showed abrupt decline. She, too, was nursed in a bed beside Ste.-Eugénie.

Elisabeth rarely looked content, but one day she giggled at length and made the nuns laugh as she donned Sr. Ste.-Eugénie’s headdress and thick-rimmed glasses, the latter low on her nose. In the gaiety’s midst, as she claimed to be in charge and ordered a sack of flour, blood gushed from her mouth onto self, sheets, floor, and those near her. A tuberculous lesion had glued together a bronchus and artery and so weakened their walls that the artery burst and its contents poured from her lips. In what was the equivalent of being shot, Elisabeth exsanguinated in seconds (PC 1918, October. 2–4, 24, 29–31; November 1).

In a tack Sr. Ste. Eugénie now closely adhered to—which might suggest

7. He is not in the Missionary Oblates of Mary Immaculate (OMI) necrologium, hence no first name.

8. That celestial messenger’s name had been given at birth to Bishop Breynat of the Mackenzie Vicariate.

the visiting Rev. Mother Superior in 1917 had found fault with her early *Chroniques* entries—the demise triggered no rant. As had been true for a while, she highlighted joyful events: a nun kissing the convent floor at returning from trip; another's impersonation of King Edward; Sr. St.-Yves, free of discomfort after surgery,⁹ causing laughter to the point of pain (PC 1918, June 23, 30; October 14; November 8).

One might have thought reports of Spanish flu's deadly westward sweep would frighten Sr. Ste.-Eugénie. Instead, she almost embraced it. If she must pass through another storm, that was her lot; should she cease to be, little would be lost (PC 1918, December 28). Reflecting on New Year's Eve about past and future, she saw little of either: "what remains of the one? What do we possess of the other? Nothing."¹⁰ Here, a few memories, there a few hopes carried off one by one [more repetition], washed away in time. A fading day, a closing night—life is but a mixture of the two" (PC 1918, December 31).

Sr. Ste-Eugénie, Post-lude

Just after Sr. Ste.-Eugénie left Fort Providence, two physicians wrote at length about consumption's pathology and course (Calmette 1920; Flick 1925). Calmette's vivid colour plates show swaths of tubercles (small yellowish pus-containing nodules—hence the name) invading infants' abdominal lining. Equally jolting are Flick's word-depictions of tb passing from parents to children via birth canal and other routes before development of partial immunity: infection takes place not primarily in lungs (hence no cough or discoloured sputum allowing early detection), but in meninges, bone, lymphatic system, kidneys, abdominal content, and other soft tissues. There lay the cause of Fort Providence's many deaths of *petits* and *petites*.

Flick and Calmette's works are the medical equivalents of Sr. Ste.-Eugénie's *Chroniques*. Combined, they shed light on much northern, native, contact, mission, medical, nursing, and women's history, as well as that of humanity at large.

They should be read side by side.

9. Dr. Macdonald on a visit had operated on what was at the time probably thought an inguinal hernia.

10. The Grey Nuns *Annales* (Anon. 1962, 242–253) tell of Elisabeth Girard's 1880 Québec birth, three older sisters who were nuns (one died early), the family move to Manitoba, Elisabeth's name-change to Sr. Ste-Eugénie, St. Boniface nursing, transfer to Montreal, and 1915 assignment as Fort Providence superior. After 1920 she moved to Fort Resolution and convents further south, worked as cook in Alberta, and after years of caring for Montreal nuns died in 1961.

Cecilia

“I wonder if God still takes pity”: illness as metaphor in the life of Cecilia Gaudet, Métis student and failed novice nun in the Mackenzie Vicariate (1909–1928)

When in 1909 the Grey Nuns added native novices to their Fort Providence convent, Cecilia¹¹ Gaudet was among the trio who joined. Raised until six years of age by her devoutly Catholic Fort Good Hope fur-trade parents, she had since lived with the sisters. Exemplary conduct, with a senior role in the students' *Enfants de Marie* association, had marked her stay. Bishop Gabriel Breynat of the Mackenzie Vicariate himself performed initiation, and the donning of nuns' clothes a year later should have made her happy. Instead, she faded in ways that resembled tb, but turned out to be psychosomatic.

That Cecilia could mimic consumption followed from cases she had witnessed. As a *petite*, a young student, she'd seen classmates decline, and as a *grande* had nursed dying victims, a horrid task she did well: at one point she looked after a girl whose malodorous body made it hard for others to stay by.

Her new weakness did not lessen care for slightly younger Lysa, who pre-mortem received lengthy bedside prayer from nuns and priest. But on hearing of many Good Hope deaths, Cecilia abruptly showed signs of brain infection, with loss of speech and sight. After last rites and confession, the father superior awaited her demise. As *grandes* and *petites* passed by the next day, she raised worry in seeming brighter, for, like a candle's last flare, it warned of death. Instead, she took communion, improved still more, and was left alone with a bell to ring for help.

Though the sister superior did not say so in her diary, it seems she sensed the mental base of Cecilia's ills. No celebrations marked her healing, no thanks were offered, nor was the patient taken to task. By allowing slow return of function, humbling was set aside. After a chapel mass Cecilia left the novitiate and became again an ordinary *grande*,¹² although she stayed at the convent for a further seven years, well into her twenties. And when at times her ills returned, the sisters paid scant attention, though perhaps that approach sometimes went too far. After months-long diarrhea (which also struck others) forced her to stay flat, it was not noted in the *Chroniques* until her return to work.

11. Cecilia may have been named after a famed Eastern Gwich'in chiefess (Crowe 1991, 90).

12. The two other novices completed training, and both died of consumption: Cécile at Fort Simpson in 1920. Noélia bled into her lungs in 1921 (ASGE 1991).

Mixed feelings, that hints, marked staff relations with Cecilia. Obedient and attentive, she had been well en route to becoming a sister when pseudo-sickness dashed that hope. Yet, she had remained among them, and continued her gentle ways. When ailing elders were admitted, she soothed them during the early days of washing and delousing in a tent outside. And for students nearing death, it was she who nursed at night.

What reasons, then, had made Cecilia ambivalent about nun-hood to the point of simulating illness? Several may have played a part. Though her early life had been linked to the nuns and devotions,¹³ adolescence brought new drives. The *Chroniques* says nothing of them, but Bishop Breynat warned her father she should “stay at the convent till married.” Without close watch, sin might occur.

Family discord, too, underlay Cecilia's pain. Her Métis father, Tim Gaudet, was Catholic; her Gwich'in mother, Anglican; a couple could not marry without promising to raise children in just one faith. It meant little, for the husband often overruled wife, and with the Gaudets that happened early. Their Anglican wedding meant offspring should have attended the Hay River Anglican school; Tim instead forced Roman baptism and Fort Providence enrolment. The minister inflamed discord by blaming the wife.

Somehow Mrs. Gaudet for a while changed views about Catholic training. In 1914 she and Rose, her youngest, visited Fort Providence to see Cecilia and two other daughters. After meeting the nuns, she liked their approach. But then, pushed by a Protestant divine, she let him take the girl.

A decade later, with the Gaudets now living at Wrigley, matters came to a head. Three new children, each at the mother's insistence baptized as Anglican, were blocked by Tim from going to Hay River: “a religious promise is not binding in law,” he angrily told the minister. Mrs. Gaudet, came the cleric's reply, was determined to “never give up” her Protestant children.

Even as the Anglican cleric lamented faith's role in home-breaking, Mrs. Gaudet moved to Fort Simpson with the infants. Rosie was still at Hay River. The two older daughters now lived with their father. Cecilia joined her mother and had an affair despite a priest's urging she leave off. Wretched, she pined for a prior lover.

Escape to Wrigley brought made things worse, as her father was still a tyrant. She would have left, but her sisters were ill, so she stayed to give care. Rosie, sent home from Hay River with tuberculosis, soon passed away. Then Marie (the Gaudets' second-oldest) began to have what looked like epilepsy.

13. Her Fort Good Hope paternal grandfather, Charles Gaudet, from Montreal, had unwaveringly supported Oblates since an 1860s foray into Anglicanism. Oblates knew his wife as the “Providence of the Mackenzie.”

For years at Fort Providence Marie had been partner to Cecilia, who recognized the seizures' resemblance with those the two had observed there in a dying tuberculous student. Marie was now using illness to stop her sister from leaving, in the same way she herself had used it to escape being a nun. But Cecilia did not grasp the dynamics. "Do you remember," she wrote to an Oblate who had long given her counsel, "how little Jessie¹⁴ suffered when she was with us at the school? Marie is just like that when she has her attacks. She had a first spell on the very day my little sister died. Just before I was going to leave, she had another episode, only much worse. As I prepared to step on the boat, she said she would go crazy if I left her. That's why I stayed at home [...] I am so discouraged, I sometimes wonder if God still takes pity on people like me" (PAA/OMI 1926, September n.d.). "You may hear gossip about me," she added, "and you will realize why that prevents me from marrying the one I want. But I don't want to marry to be unhappy. I've had enough of that sort of thing." In time, however, thought of the longed-for man faded. In 1928, she waitressed on *The Distributor*, a trade-company steamer, and fell in love with the engineer.

Bishop Breynat's accord to marriage was needed, since the future husband was Protestant. And though, as the priest put it, he adored Cecilia and showed no deceit, one never knew what might ensue, since mixed unions brought "no end of misery" (PAA/OMI 1928a, October 3; PAA/OMI 1928b, December 4). Still, permission arrived, and they were wed.¹⁵

Louisa's Baby: A North-west Mounted Police Doctor, Venereal Disease, and Native-White Relations at Fort McPherson (1911–1914)

In 1911, as part of a system of political patronage, Canada's Prime Minister Sir Wilfrid Laurier, assigned Dr. Charles A. Wilson to care for North-west Mounted Police (NWMP) at Fort McPherson, among Gwich'in near the Mackenzie Delta (WE 1911b, May 12). The posting surely pleased the senator who had pushed Dr. Wilson's cause (WE 1911a, March 31; 1911d, July 11; WE 1911e, July 11) but Wilson replied to his sponsor with anger—he wanted work in a congenial southern setting, not at this "desolate post." He would go, but needed a thousand dollars to "pay obligations" and buy goods. "Wire funds," barked his telegram, "must not be an absconder, answer immediately" (WE 1911c, May 18). One wonders what had happened between them to fuel that awful tone.

14. Little Nicolas, sister of Jessie, was brought to the convent March 9, 1908 and died on 18 March (PC 1908, March 18). Their mother died in October 1909 (PC 1909, December 5) Jessie, then age twelve, reached the convent December 5 and passed away the next day (PC 1909, December 5–6).

15. The wedding was likely performed by Father Turcotte OMI, a junior priest based at Fort Simpson who spent time at Fort Wrigley (Carrière 1977, 303).

Arriving at Ft. McPherson in July 1911, Wilson showed a broad range of skills. Skin grafts took “beautifully” on a severely burned Gwich’in matron whose corpulence made dressing difficult. Delirium, fever, and renal problems marked her course, yet she was up and about by Christmas.

The doctor had less success with a tuberculous woman, Jane Austin, whose death let him deploy close pathology knowledge. Deformed by vertebral collapse, or Pott’s disease, she had not sought help until her swollen lymph glands burst. Autopsy showed pus from spine to groin. Amyloidosis, a sugary deposit due to chronic infection, marked her kidneys and liver (WE 1912a, January 21).

That fall Wilson developed a connection with Fort McPherson’s Anglican cleric Charles E. Whittaker (MPAJ 1911–1912), who had long served natives and whites as amateur physician. While the doctor visited Herschel Island, the Reverend cared for his patients. Nevertheless, “the surgeon” (as North-west Territories doctors were then called) earned ridicule.

Wilson was obsessed with money. Since his contract only mentioned care of police, he resented tending to natives. The few NWMP on site needed little attention, while many natives sought help. Fall weather caused rheumatic pains, colds, and sore throats; trail-side willows often scratched eyes.

On learning that the Department of Indian Affairs (DIA) gave Yukon doctors fifty dollars per month on top of their police salary, Wilson wanted it too. In less than half-a-year, said his demanding letter, he’d seen 293 natives, done 349 consultations, made 321 follow-up visits, dispensed drugs 574 times, and performed 37 minor surgical procedures (resentment, it seems, had fuelled obsessive tallies). By spring, he was on the DIA payroll (WE 1912b, February 16).

Money, however, continued to be a problem. Wilson had long-standing debts, including one to a lady in England. Tired of waiting, Mrs. Alice Blair Willcocks sent request for payment directly to senior officials in the NWMP, who passed it down the chain of command to Fort McPherson (WE 1913a, February 27; WE 1913b, March 11). And there, ties there had already turned bad, since the doctor was niggly. Policemen did the cooking and cleaning, and their Gwich’in employee daily brought hot water; but Wilson resented the cost of that service, and instead of paying three dollars a month, did so only once yearly.

Also at issue were detachment surplus supplies, which each year reverted to staff and were traded to whites and natives. Sure he was being cheated, Wilson laid a charge against local Sergeant Clay with the region’s top officer, J. W. Phillips, who stopped sales: no longer could doctor or policemen earn extra money (WC 1913, July 13). Along with the ruling came deep enmity toward the physician.

Bemoaning conditions, seldom content, and showing prickly ways Wilson was thought a “wet-blanket” and became increasingly isolated. Seldom content, he was thought a “wet-blanket.” His righteous tone, moreover, did not match his actions, for at Fort McPherson he often slept with a Gwich’in woman, Louisa Teedehook, who conceived in early 1914. Questioned by Sergeant Clay, he “strenuously” denied a role (SSBP 1915, W. G. Phillips).

Louisa’s pregnancy coincided with another social upheaval in Fort McPherson’s small winter community. Of the locals who taunted the medical father-to-be, none took more pleasure than Joseph Jacquot, an independent white trader. The man’s name reflected his Catholic Quebec birth (as it happened, St. Joseph, the father of Jesus, had been made patron saint of the Apostolic Vicariate of the Mackenzie by its bishop). He had been living with Sara Teedehook, a young Gwich’in woman, for a few years, but in early 1914 she walked out, angered by Joseph yet again infecting her with venereal disease after a journey to Dawson.

Jacquot, aware Clay had paid Sara extra attention (sending her liquor, blankets, and food), became sure the policeman was her lover and had ordered her to leave him. Confronting his rival, he got into a fight, was jailed, and charged with assault. Then Dr. Wilson, acting as judge, inflicted a sentence of two months’ hard labour. In Jacquot’s eyes, Wilson was getting even for the ribbing he had given him over Louisa’s child.

Tied to a log and thirty pounds of birdshot, Jacquot slept by the stove in a space “no larger than a coffin,” and went out no further than the woodpile. Then, promising to behave, he was let go. The docility, however, was faked: while in jail he and the doctor had laid plans to ruin Clay. Heading at once for the Yukon, Jacquot wrote from there to the RNMP commissioner in Regina, detailing his unjust lot (WC 1914b, August 22).

Dr. Wilson also left Fort McPherson having asked, as soon as Louisa fell pregnant, for transfer to a city near home. “I have or will have had when the summer boat arrives,” he moaned, “three years at this post, and it is about all I can stand” (WE 1914a, February 14). Senior officials sent his political sponsor, Senator Edwards, a private note and did not renew his contract (WE 1914b, March 30; WE 1914c, March 31).

Though unaware of the decision, Wilson grew more devious the further south he went (WC 1914a, July 10). At Fort Simpson he claimed to be the Mackenzie’s new full-time Indian Affairs doctor. At the Alberta NWMP headquarters he made damning claims while painting his own role as uniformly good, asserting that when he had first arrived in the North, police “were held in contempt by the whole of the population.” His actions had improved that dreadful situation, but issues remained. W. G. Phillips,

Mackenzie District NWMP inspector, lacked the men's confidence and Sergeant Clay, chronically depressed, was unfit for a distant post (WC 1914d, September 11, WC 1914e, September 29; WE 1914b, March 30; WC 1914c, August 22).

As Wilson told it, Clay had contracted gonorrhea from Jacquot's wife Sara. To avoid her re-infection, Wilson had forced Sara's separation from her husband. Jacquot had then attacked the Sergeant and been admitted to prison, where the harshness of his treatment matched the Sergeant's genital discomfort: hugely swollen testicles that precluded work.

The doctor's story had less effect than he hoped. NWMP Commissioner Perry felt staff should resign if trust had indeed been "betrayed." He gave scant credence to Wilson, whose "sweeping accusations" did not match what was known of these men: Clay in particular had a fine reputation (WC 1914d, September 11; SSBP 1915, W. G. Phillips).

At Fort Macpherson, Wilson's charges drew scorn. To no one's surprise, not a single word was said in his support. Frequent drunkenness had brought him no friends in the staunchly Anglican settlement. His unmarried life with a native woman had offended the local missionary, and his work as an independent trader had made him foe of the HBC clerk. Wide knowledge of his repeatedly transmitting venereal illness to his wife had led to loathing. His tattling to senior police had made matters worse.

Denying wrongs by Clay, whites in sworn depositions told how Dr. Wilson had evoked ill feeling throughout his time in the community. Whitaker "strongly rejected" all claims—it was the doctor, not the police, who lacked people's confidence (SSBP 1915). Gwich'in had bewailed his "contempt and harshness" and complained he "grossly neglected many needy and deserving cases." Another cleric labelled his tale preposterous and spiteful.

Arthur Blake, a former policeman spoke of Wilson's aggression and brooding: he was "held in more contempt by the population" than anyone he could think of, calling him "the smallest big man" he had ever met (SSBP 1915). According to Firth, Clay's qualities were opposite to those reported by the doctor; rather than sullen and incompetent, he was "very pleasant, most genial, and the most efficient officer" ever in charge at Fort McPherson (SSBP 1915). Wilson, by contrast, was "the only man who made himself absolutely obnoxious" to police and the rest of the population (Firth had been at the HBC trading post since 1893).

A HBC inspector added that if Clay had ever been unpleasant to Wilson, he would merely have been "repaying him in kind." It was absurd for the doctor to say he had rescued police reputation; if there was lack of respect, it applied only to the physician, whose conduct "both socially and profes-

sionally,” had earned Gwich’in, Inuit, and White disdain (SSBP 1915, W. G. Phillips).

Jacquot’s history of violent conduct elsewhere, as the Sergeant’s superior (WC 1915, February 6) pointed out, made his support of Dr. Wilson’s claims suspect, and gave credence to Clay’s insistence that arrest and sentencing had been correct. The improvised “ball and chain” had been worn just two days, and after discharge he had not been stopped from seeing his wife Sara, whose barrack visits during Jacquot’s jailing pointed not to trysts with Clay (SSBP 1915, Clay), but to needs of a female prisoner held nearby. Even had the sergeant wanted to sleep with Sara while her husband was confined, it would have been impossible as he was away on patrol much of that time.

Other policemen (SSBP 1915, Long; SSBP 1915, Doak), confirmed the Sergeant’s innocence before a formal enquiry, as did Sarah Jacquot (SSBP 1915). On returning from his last Dawson trip, her husband had asked her help to “make trouble” and dishonour Clay. She balked because there was no base for complaint: the Sergeant had “always treated me good,” he had never offered gifts, since she had “grub and blankets” of her own. Sara’s statement was signed with “her X.”

Jacquot could not counter Sara’s story, for a month after telling her of his plan to harm the sergeant, he “accidentally drowned” (as Clay’s report put it) while traveling on the Mackenzie in early October. To some, his demise may have seemed strange, given he was a seasoned traveler, water levels at that time of year were low, and streams ran gently. His canoe, contents, and hat were recovered intact, but the body was never found. Rumour said that drinking or suicide might have played a role. Other theories received no time.

Louisa Teeheedook gave birth in November of 1915. At the baptism, conducted by Whittaker, she affirmed the child belonged “to Dr. Wilson.” Having an infant, however, did not stop her from being courted by others. Within days she received a note from Pete Peterson, a well-known trader in the Mackenzie Delta, to whom an Anglican minister soon wed her (MPAJ 1914, November 22–25). They left for Red River, but from time to time visited the Fort McPherson Anglican mission (MPAJ 1916, June 17).

Sara Jacquot married a certain Herbert, a Gwich’in, eight months after her husband’s death (MPAJ 1914, October 8).

Clay, by then on furlough in the south, found the love of his life and brought her to McPherson. “One of the finest women who ever lived,” Margaret became the “general favourite” of the white population along the Mackenzie. The couple never had children, suggesting the illness Clay had suffered may not have been a venereal one, but rather mumps. Indeed,

that explains the Sergeant's painful swollen testicles better than gonorrhea. (Either the doctor was not as good a clinician as he thought, or he misled in making a venereal diagnosis. On the other hand, how could Clay have gone on patrol if pain was so intense.)

Mrs. Clay insisted on living with her husband at each posting, even when he thought it too dangerous. In 1924, his last year in the North, she accompanied him to Chesterfield Inlet. There, while the Sergeant was away on patrol, a pack of sled dogs attacked her, inflicting mortal wounds. Unaware, he came home a fortnight later (Godsell 1959, 60–62).

Appendix

Grey Nuns' work in perspective:

three brief sketches of medical doctors who followed Dr. Wilson

Dr. Doyle

In 1916 Dr. Philip Ernest Doyle, recent McGill graduate and newly appointed police surgeon, arrived at McPherson, where the Rev. Whittaker often noted his helpful presence at the bedside of ailing Gwich'in. He travelled widely, spending time in the Mackenzie Delta and on the coast. At Herschel Island, where no medical man had visited since Wilson's brief sojourn in 1911, he found the people in a "very sick" state.¹⁶ Tuberculosis,

16. Walter Fry's annual letter from Herschel Island reads: "[Dr. Doyle] from McPherson arrived at the Island a week before we did and when we saw him he told us that he had his hands full. This is the first time in years that a medical Dr. has been here, except one visit of about two weeks by Dr. Wilson four [WV: it was five] years ago. Dr. Doyle found the people in a very sick condition and on this account stayed with us as long as he could, not leaving for MacPherson until two weeks after Mr. W[hittaker] had already gone. Some of the people died during his stay with us. The Dr. diagnosed their diseases as pneumonia, diphtheria, meningitis, etc. Almost all the children were suffering with sores on their heads, faces and necks. Others are troubled with bronchitis and some of that loathsome disease hereditary syphilis. One poor woman eight months pregnant died of burns aggravated by premature parturition. Another pregnant woman is laid low with tuberculosis and being extremely weak is rarely out of bed. Yet another little lad is covered from head to foot with boils. Then, also, quite recently there is a new epidemic of sore eyes when the flesh around the eyes becomes inflamed and raw. Do our friends know that we receive no medical supplies either from the government or from our mission except that we can pay for ourselves? When the doctor left us we tried to carry on his work but he could not spare us any of his small store of medicines for this purpose. We have depended entirely upon the medical and surgical supplies which we brought with us, and which we were able to purchase with the monies given us by the Woman's Auxiliary of Toronto and Friends of Brantford [...] My wife is a great help to me in the work, a good wife, and a true missionary. There are some things only a woman can do. When our people need help she realizes their need long before I do and has been of great service where I should have failed utterly. The doctor discovered this before I left and now the Police Inspector brings many of the cases which come before him to her" (AAT 1916).

syphilis, and eye infections were common; children had sores on scalp and face. He stayed as long as possible (AAT 1916).

In time, Doyle's devotion faded. He liked alcohol and native women, and by 1924, ill health forced resignation. "Seriously affected in his mind, suffering from frightful illusions," he thought himself guilty for spreading "a horrible disease," probably syphilis as his symptoms resembled those of the late cerebral stage of that disorder. Unable to ship him out until summer, whites at Aklavik wearied of his ranting and reached the point where they wanted to "put him down through a hole in the ice" or shoot him.

That year saw a start on the combined Catholic residential school, orphanage, and wards for natives, which spurred Anglicans to fund a hospital and residential school months later. It also made police less willing to lay out costs for a physician who spent most of his time with Inuit and Gwich'in.

It was not that police disliked having doctors fill multiple functions; in southern posts their Acting Assistant Surgeons were already in others' part-time employ. Fort Simpson's DIA doctor, for example, received an annual fee to look after NWMP men. The Aklavik setup, by contrast, cost more, and that could not go on, for such care took but an "infinitesimal" part of clinic time. A few dollars would do.

Ignoring the complaint, O. S. Finnie, Ottawa bureaucrat in charge of the North-west Territories, denied federal funds for an Aklavik-based physician, committed to sending Doyle's replacement, and doubted RCMP threats to drop such employ (NAC 1924, September 23).¹⁷

Dr. Ward

Dr. Albert Edward Ward, the next physician, saw DIA pay a third of his salary; police, the rest.¹⁸ By 1928, however, the latter found this "disappointing and expensive," since NWMP men had only twice sought aid. Ward had endlessly seen Inuit patients at Aklavik and Herschel Island. As it was, Ward had been hired with reservations, and now, after just a year in the North, he insisted on leaving because his mother was ill. So the NWMP told Finnie, now responsible for the Inuit, to hire his own physician.

And that is what happened (NAC 1928, February 13; NAC 1928b, February 18; NAC 1928c, February 21). Ottawa felt pressure not only about

17. The main police unit itself was at Herschel Island. It was moved to Aklavik the year Doyle went south.

18. DIA \$750 plus RCMP \$1,750 for a total of \$2,500, which is equivalent to \$37,500 now. I have not scanned southern medical doctor incomes, but these sums hint of whites' paying Ward directly.

the woe-full care of native peoples, but of whites increasingly occupying the North.

“Dr.” Livingstone

Aklavik's third doctor, Leslie Livingstone, was on direct Ottawa pay, except for a small RCMP sum, plus Ward's quarters at no cost, and free passage on police boats. Indian Affairs more than halved its prior part, as few Gwich'in came by, and it was no longer responsible for Inuit.

Livingstone brought a wife, had children, built a farm, kept cows, and behaved well (Copland 1967), though whites queried his skills. Some refused submitting to his knife. The concern was well-founded, for he had not completed medical school at Toronto, nor kept up to date. But that, another of the North's startling early-contact stories, cries for pages of its own.

Abbreviations

AAT	Archives of the Synod of the Anglican Church in Canada, Toronto
ASGE	Archives des Soeurs Grises, Edmonton, now at ASGM
ASGM	Archives des Soeurs Grises, Montreal
GN	Grey Nuns, formally: the Sisters of Charity of Montreal
DIA	Department of Indian Affairs, Ottawa
HBC	Hudson's Bay Company
MPAJ	Fort McPherson Anglican Mission daily journal Anglican Church of Canada, General Synod Archives, Toronto
NAC	National Archives of Canada
NWMP	Royal North-west Mounted Police (Royal title, 1904; became RCMP, 1920.)
OMI	Oblates of Mary Immaculate
OSA	Oblate Archives at St. Albert, Alberta, now at PAA
PAA	Provincial Archives of Alberta ¹⁹
PC	Fort Providence Grey Nun <i>Chroniques</i> (daily journal) (ASGE, now ASGM.)
RCMP	Royal Canadian Mounted Police
SSBP	Sworn statement before police. February 6–8, 1915, Fort McPherson RG 18, vol. 486, file 282
WC	Dr. Wilson complaints file, NWMP. RG 18, v. 486, f. 282
WE	Wilson employ file, NWMP. RG 18 v. 463, f. 252–254

19. It is sometimes of interest to see how these wide-flung archives from Far North sites gradually made their way to St. Albert, then Edmonton, then Ottawa (Oblates) then south of the St. Lawrence Grey Nuns in Montreal, Oblates in St. Jean on the Richelieu.

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- . 1917. January 8–10, 26; May 1, 4, 10–13, 17; July 3–4, 11–13, 20; October 17.
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ASGE. 1991. Hand-typed, two-page list of deceased nuns in Grey Nun Divine Providence province.

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———. 1914d. A. B. Perry to McDonnell. September 11.

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