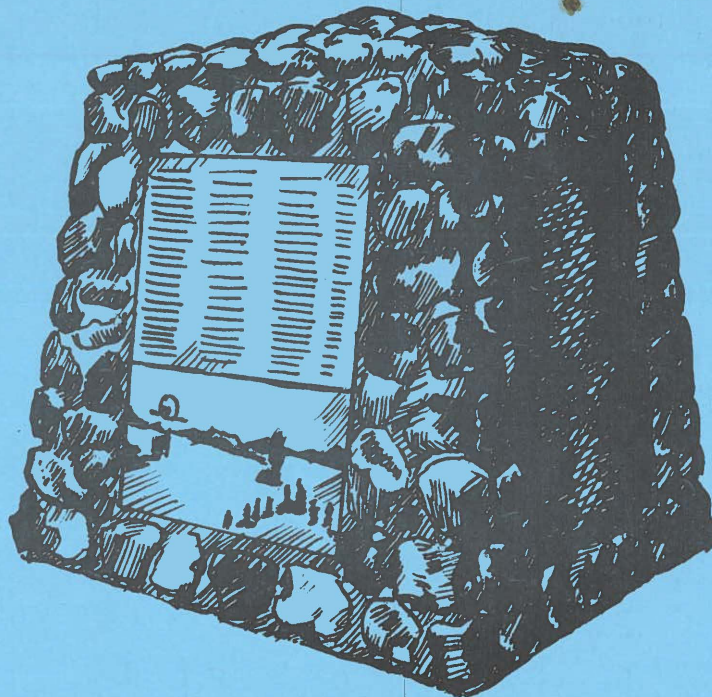


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MEDICAL PATIENT SEARCH PROJECT



Summary – Final Report
April 1991

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PURPOSE OF THE REPORT

The purpose of this report is to update Members of the Legislative Assembly on the Medical Patient Search Project, commenced twenty-seven (27) months ago, in January 1989. The mandate of the Project was to trace medical patients who went missing during the period 1940-1975 following medical treatment in the south, and where possible, to advise relatives of their cause of death and burial site.

Delegates to the Inuit Elders Conference held in Pelly Bay in 1987 asked for information about the lost members of their families. Early in 1988, High Arctic MLA Ludy Pudluk asked for information about Inuit who did not return after they were sent south to be treated for tuberculosis. In August 1988, Amittuq MLA Titus Allooloo asked for information about the grave sites of Inuit buried in the south. During 1989, Nunatsiak Riding MP Jack Anawak forwarded several requests for searches from his constituents.

As a result of this continuing search for information, the Honourable Nellie Cournoyea, Minister of Health, created the Medical Patient Search Project in November 1988.

INTRODUCTION

Tuberculosis was rampant among Northern Native people in the 1940s. Some experts suggest the death rate from tuberculosis among Native people in the Arctic probably exceeded 50 for every 10,000 residents in the late 1940s and may have reached as high as 100 for every 10,000 residents in some areas (Grzybowski et al, p.S4). This led the federal government to develop an organized plan to deal with tuberculosis in the Canadian North.

In the 1950s and 1960s, many Inuit from the Northwest Territories were sent to hospitals and sanatoria across southern Canada for treatment of tuberculosis. The cases were diagnosed by travelling medical teams with portable x-ray machines; Native people with active cases were immediately sent south. In 1956, 793 Inuit were under treatment for tuberculosis (Wherrett, 1964).

Between 1953 and 1964, 4,836 Inuit from the Northwest Territories (about half of the NWT's estimated average Inuit population during that time) were institutionalized. Between 75% and 80% of these Inuit were sent to southern sanatoria, where the average stay was about 28 months (Nixon, p.67). By 1972-73, the average length of stay had dropped to about 2.9 months, and some Inuit were starting to be treated in local general hospitals in the North (Grzybowski et al, p.S8). Some of the Inuit sent south to be treated for tuberculosis never came back, and their families never heard anything further from them or about them. They were not forgotten, however, and their families continued to wonder what had happened to them.

IDENTIFYING INFORMATION SOURCES

The initial phase of the Project involved determining where Northern patients had been sent for treatment and, if they had died, where they were buried. A list was prepared identifying the hospitals and sanatoria to which patients were sent. The list also showed the dates when these institutions were in operation.

a) Alberta Hospitals

Tuberculosis patients from the Western Arctic and the Kitikmeot Region were sent to hospitals in Edmonton, Alberta, most notably Charles Camsell Hospital. Communication between the Kitikmeot communities and Charles Camsell Hospital was apparently excellent, primarily due to the radio communication and transportation facilities available through the Distant Early Warning (DEW) site in Cambridge Bay. Communication between the Charles Camsell Hospital and the Western Arctic was facilitated by the missions, the Hudson Bay Company, the Royal Canadian Mounted Police, and personnel from the Distant Early Warning (DEW) Line sites.

b) Manitoba Hospitals

The records indicate that patients from Keewatin communities were sent to various hospitals in Manitoba and, sometimes, to hospitals in northern Ontario. Several Manitoba communities accepted patients from the NWT and Arctic Quebec between 1940 and 1975, including Winnipeg, St. Vital, Brandon, Selkirk, Fisher, Ninette, Clearwater Lake, Churchill, and Norway House.

c) Ontario, Quebec and Nova Scotia Hospitals

Patients from communities in the Baffin region were sent to Ontario, Quebec and Nova Scotia hospitals. Communication between these hospitals and the northern communities was often very poor.

Ontario communities which accepted patients from the NWT and Arctic Quebec included Toronto, Weston, Hamilton, and in northern Ontario, Moose Factory and Fort William.

Quebec communities which accepted these patients included Montreal, Kahnawake, Roberval, Ste. Agathe, Quebec City, Ste. Foy, and Cartierville.

Nova Scotia communities which accepted patients from the NWT and Arctic Quebec during the years 1940-1975 included Halifax, Kentville, and Dartmouth.

d) Alberta Cemeteries

Patients who died in Alberta hospitals were buried in municipal cemeteries in Edmonton. Cemeteries known to date include Beechmount Cemetery and Holy Cross Catholic Cemetery in Edmonton, St. Albert Native Cemetery in St. Albert, and Winterburn Catholic Cemetery in Winterburn.

In 1987, a committee was formed from former staff of the Charles Camsell Hospital to plan the construction of a cairn in memory of Inuit and Indian people who died at the hospital between 1946 and 1966. The committee members were Dr. Otto Schaefer, Mr. Donald McBride, Mrs. Maxine LeClair and Miss Elva Taylor. Early in 1989, the Camsell Hospital Historical Society and the City of St. Albert began work on establishing a memorial to former Camsell patients buried at the Native Cemetery. The responsibility for the design and construction of the monument rested solely with the committee. The Minister of Health attended a memorial cairn dedication ceremony in St. Albert, Alberta on June 22, 1990, and made brief remarks at both a planned luncheon and the dedication ceremony itself. The cairn was erected in honour of 98 patients of aboriginal ancestry buried at the St. Albert Cemetery. Of this number 68 were from the NWT: 62 Inuit and 6 Dene.

e) Manitoba Cemeteries

Information about cemeteries in Manitoba was received from the Director of Cemeteries in Winnipeg, who photographed some cemeteries in which Northern residents are known to be buried. Information provided by a member of the R.C.M.P. in Manitoba who has researched records and photographed cemeteries was also useful in locating patients buried near The Pas. Communities in which Northern residents are buried include The Pas, Winnipeg, Churchill, Brandon, West St. Paul, Belmont and Griswold.

f) Ontario Cemeteries

The Director of Cemeteries for the City of Hamilton, Mr. Chester Orzel, provided information and support. After searching the records, his staff provided a list of patients buried at Woodland Cemetery in Hamilton. When Inuit visit their relatives' graves, the Director, the minister of the local Anglican Church and several former Northern residents are generous with their help. Mr. Charlie Crow, MLA for Hudson Bay, visited Hamilton in December 1989.

Most of the patients from Sanikiluaq were sent to hospitals in Hamilton and Moose Factory in northern Ontario, and were buried in those communities. However, some Inuit patients, as well as Dene, were buried in smaller communities such as Woodstock, Cochrane, and Timmins.

g) Quebec Cemeteries

Letters were sent from the Minister of Health to the mayors of communities where Northerners were sent for tuberculosis treatment. While the response was good, extra time had to be dedicated to searching for records in Quebec.

Northern patients were buried in various cemeteries in Montreal, Kahnawake, Sillery, St. Hubert (near Montreal) and Quebec City.

While information is available through the Quebec government's Access to Information coordinator, specific information about the cause of death is released only to families. Death certificates provided to the Project do not include cause of death, so families in the NWT who would like this information will have to write directly to Quebec to learn of the cause of death. To date, the causes of death known for all patients located in other provinces range from tuberculosis, cancer, heart disease to accidental deaths. In many cases, death was a result of more than one major cause, such as tuberculosis and pneumonia in combination.

A complete list of southern cemeteries in which Project patients are known to be buried has been compiled. (Appendix 2)

IDENTIFYING THE "LOST" PATIENTS

In February, 1989, the Minister of Health sent letters to communities and organizations throughout the Northwest Territories announcing that the Project had started. Requests for tracing lost relatives also developed from a small advertisement in the Keewatin Inuit Association Newsletter in early 1989 and from articles and reports on the Medical Patient Search Project in various newspapers and magazines, radio and television. Consultation was undertaken with communities by letter and telephone. Presentations on the Project were made to some organizations at their invitation, and meetings were held with many individuals.

In March 1990, the Minister advised 47 families by letter of the whereabouts of their missing relatives and the cause of death. Since then, similar letters have been sent out to the families of 24 additional patients. During June and July 1990, posters advertising the Project were sent out to all communities. Anik Info spots and CBC Radio PSAs were broadcast at the same time, as well as during the months of August and September 1990. A final media blitz was initiated with the broadcasting of the radio PSA across the NWT in all local dialects during the months of December 1990 and January 1991. Project posters were re-issued to all communities as of late November 1990. This final campaign gave families one final opportunity to request searches before the Project's proposed end in March 1991.

Since November, 1988, the Department of Health has received 80 requests to trace relatives. These requests came from the following communities:

Arctic Bay	3		
Arviat	6		
Baker Lake	1		
Cambridge Bay	2		
Cape Dorset	6		
Coral Harbour	1		
Fort Franklin	1		
Fort Norman	1		
Fort Rae	5		
Fort Smith	2		
Hall Beach	1		
Holman Island	1		
Igloolik	3		
Iqaluit	2		
Lake Harbour	1		
Pond Inlet	6		
Rankin Inlet	3		
Repulse Bay	2		
Resolute Bay	1		
Sanikiluaq	20		
Spence Bay	2		
Wrigley	2		
Yellowknife	6		
Mountain, Ont.	1		
Salliut, Que.	1		
TOTAL	<u>80</u>	(Dene	15
		Inuit	64
		Other	1)

71 of these 80 requests have been answered to date. (89%)

INFORMING THE RELATIVES

Seventy-one replies have been made to families seeking information about lost relatives. Information letters were clear and factual, listing cause, date and place of death and place of burial, along with certified copies of the Certificate of Death and the Medical Examiner's Certificate, where available. The letters were translated into appropriate languages, signed by the Minister, and sent to the family by registered mail. In mid-March of 1990 fifteen letters were carried personally to Sanikiluaq by MLA Charlie Crow.

The length of time between the requests by families and the provision of information was a matter of concern. However, it was difficult to avoid delay given the fact that records were scattered around the country and, in some cases, could not be found.

Some birth and death records were available through Vital Statistics in Yellowknife. Records located at the Roman Catholic Diocesan Centre in Yellowknife were useful in responding to requests from Mackenzie communities. Disc lists and treaty lists, when fully compiled, were useful in providing positive identification. However, most records were located in other jurisdictions.

Since September 1989, increased efforts have been made to develop a direct liaison with the Provincial Offices of Vital Statistics. With the cooperation of the Registrar of Vital Statistics in Yellowknife, direct contact between the Coordinator of the Medical Patient Search Project and the provincial offices was firmly established. Vital Statistics offices in Alberta, Manitoba, Ontario, Quebec and Nova Scotia were requested to send copies of the Certified Statement of Death and Certified Medical Examiner's Statement for all patients on file. These documents provide official information regarding the patient's name, date and place of death, cause of death and place of burial, thereby answering the questions raised by the families. Certified copies of these documents, together with a covering letter from the Minister of Health, are sent to each respective family.

The information which has been provided to families through the Project may encourage other families to seek assistance in tracing lost relatives. At the end of the Project, individuals or families who wish to have a search done will still be able to contact the Department of Health with their request, as the procedures for conducting a search are now firmly established. Additional requests received after March 1991 will be handled by Department staff on an individual basis.

In order to conduct a search, an office of Vital Statistics needs specific information. A list of the information items required is attached to this report (Appendix 1).

SUMMARY OF PROGRESS AND OUTSTANDING PROBLEMS

April 30, 1991

The Medical Patient Search Project has responded to requests for information on patients sent to the south for medical treatment during the '40s, '50s and '60s. Direct communication between the Department of Health and Vital Statistics offices in the south has enabled us to obtain the requested information on most patients fairly readily. However, there have been difficulties. Often, the required records have been lost, destroyed, or moved to other locations for safekeeping. Some provinces have very strict guidelines regarding the release of material of a confidential nature. Some searches have been conducted with very little preliminary information to go on, and in some cases the many variant spellings of patient names made location of records difficult when disc numbers were not known.

The Department has been able to locate records of death and burial for the majority of requests handled to date. Of sixty-one original requests, fifty-four successful searches have been conducted. This total includes one patient who was found alive and subsequently was reunited with his family. The remaining seven original requests are still being investigated, and partial information has been obtained for five of them. The status of outstanding cases is monitored on an ongoing basis and updated as needed.

Since the start of the 1990-91 fiscal year, nineteen new requests for information have been received, and records have already been obtained and forwarded for seventeen of these patients. When combined with the original cases, this represents an overall success rate of 89% to date (records found and forwarded for 71 of 80 patients).

Of the nine remaining open cases, two have only been received in the last four months. These two are still being actively pursued and it is likely that information will be obtained for each of these cases. It is the remaining seven cases that present problems. These are "original" cases in the sense that they have been on file since or near the beginning of the Project's term in January 1989.

Although the Project has terminated, the Department will continue to investigate these requests and others as they come in, and will try to provide each patient's family with clear, accurate details concerning their relative's death and burial in the south, where these facts are available. Family members should not be discouraged by the time it takes to receive a response to their request. Even successful searches may take several months to conduct, as reliable information is not always readily available, and often requires confirmation.

APPENDIX 1

**INFORMATION REQUIRED BY VITAL STATISTICS OFFICES
TO CONDUCT A SEARCH OF RECORDS**

DISC/TREATY NUMBER:

SURNAME OF DECEASED:

GIVEN NAMES:

AGE:

SEX:

YEAR OF DEPARTURE:

AREA THEY LEFT FROM:

WHERE THEY WERE GOING:

DATE OF DEATH:

PLACE OF DEATH:

DEATH REGISTRATION NUMBER:

DATE OF BIRTH:

BIRTH CERTIFICATE NUMBER:

NAME OF FATHER:

NAME OF MOTHER:

USUAL RESIDENCE:

MARITAL STATUS:

RELIGION:

NAME OF PERSON INQUIRING:

ADDRESS:

RELATIONSHIP TO PATIENT:

TELEPHONE NUMBER(S):

APPENDIX 2

CEMETERIES

Photographs and graveyard lists have been compiled for the following cemeteries:

- *** Winterburn Catholic Cemetery, Winterburn, Alberta
- *** St. Albert Native Cemetery, St. Albert, Alberta
- *** St. Albert Residential School Cemetery
- ** Fort Simpson Cemetery, Fort Simpson, N.W.T.
- ** Churchill Cemetery, Churchill, Manitoba
- *** Mile 6 Cemetery, The Pas, Manitoba
- *** Lakeside Cemetery, The Pas, Manitoba
- *** Riverside Cemetery, West St. Paul, Manitoba
- *** St. Vital Cemetery, Winnipeg, Manitoba
- *** Brookside Cemetery, Rosser (Winnipeg), Manitoba
- *** Woodland Cemetery, Hamilton, Ontario
- *** St. Thomas Anglican Cemetery, Moose Factory, Ontario
- ** United Church Cemetery, Kahnawake, Quebec

** List only.

*** Photographs and grave yard list.

Other cemeteries where Inuit are buried:

Roman Catholic Cemetery, Kahnawake, Quebec
Mount Royal Cemeteries, Montreal, Quebec
Cote-des-Neiges Cemetery, Montreal, Quebec
Hawthorn Dale Cemetery, Montreal, Quebec
St. Hubert Cemetery, St. Hubert, Quebec
Mount Hermon Cemetery, Sillery, Quebec
St. Charles Cemetery, Quebec City, Quebec
Anglican Cemetery, Woodstock, Ontario
Civic Cemetery, Cochrane, Ontario
Timmins Memorial Cemetery, Timmins, Ontario
Brandon Memorial Cemetery, Brandon, Manitoba
Anglican Cemetery, Churchill, Manitoba
Belmont Cemetery, Belmont, Manitoba
Oak River Reserve Cemetery, Griswold, Manitoba
St. John's Cemetery, Winnipeg, Manitoba
Holy Cross Catholic Cemetery, Edmonton, Alberta
Beechmount Cemetery, Edmonton, Alberta

APPENDIX 3

HOSPITALS ACCEPTING PATIENTS FROM THE N.W.T. DURING 1940-1975

ALBERTA

- Charles Camsell Hospital, Edmonton
- Eberhardt Memorial Hospital, Edmonton
- Edmonton General Hospital, Edmonton
- University Hospital, Edmonton
- Oliver Hospital (now Alberta Hospital), Edmonton

MANITOBA

- King Edward Hospital, Winnipeg
- General Hospital, Winnipeg
- D.A. Stewart Centre, Winnipeg
- Princess Elizabeth Hospital, Winnipeg
- St. Amant Centre, Winnipeg
- St. Boniface Hospital, St. Vital
- Brandon Mental Hospital, Brandon
- Brandon T.B. Sanatorium, Brandon
- Assiniboine Hospital, Brandon
- Selkirk Mental Hospital, Selkirk
- Selkirk Tuberculosis Sanatorium, Selkirk
- Dynevor Indian Hospital, Selkirk
- Fisher Indian Hospital, Fisher
- Ninette T.B. Sanatorium, Ninette
- Clearwater Lake Sanatorium, Clearwater Lake
- Churchill Military Hospital, Churchill
- Norway House, Manitoba

ONTARIO

- Weston Tuberculosis Sanatorium, Weston
- Toronto General Hospital, Toronto
- Queen Mary Hospital for T.B. Children, Toronto
- Moose Factory Hospital, Moose Factory
- Mountain Sanatorium, Hamilton
- Fort William Sanatorium, Fort William

APPENDIX 3 - Continued

QUEBEC

- Alexandra Hospital, Montreal
- Children's Memorial Hospital, Montreal
- Grace Dart Hospital, Montreal
- Julius Richardson Convalescent Home, Montreal
- Montreal General Hospital, Montreal
- L'Hotel Dieu, Montreal
- Verdun Protestant Hospital, Montreal
- St. Justine Hospital, Kahnawake
- Sacred Heart Hospital, Kahnawake
- St. Michael's Hospital, Roberval
- Roberval Hospital, Roberval
- Ste. Agathe Sanatorium, Ste. Agathe
- Parc Savard Immigration Hospital, Quebec City
- Laval Hospital, Ste. Foy
- Veterans' Hospital, Ste. Foy
- l'Hopital du Sacre Coeur, Cartierville

NOVA SCOTIA

- Halifax Infirmary Hospital, Halifax
- Victoria General Hospital, Halifax
- Royal Canadian Naval Hospital, Halifax
- Nova Scotia Hospital, Dartmouth
- Dartmouth Mental Hospital, Dartmouth
- Miller Sanatorium, Kentville

APPENDIX 4

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