

Disease and the Growth of Dawson City: The Seamy Underside of a Legend¹

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The Klondike was the last great North American gold rush. Thousands descended on Dawson City driven by the myth of becoming the next 'Klondike King'. The legend of the gold rush celebrated the 'men who toil for gold', the Klondike Kings: Nigger Jim Daugherty and Swift-water Bill Gates. It memorialized the dancehall girls, Diamond Tooth Gertie and the 'Turkish Whirlwind Danseuse'; and Sam Steele of the NWMP 'presiding at a bizarre and unforgettable moment in history' while the champagne 'ran as swiftly as the water in the sluice boxes on Eldorado.'²

This was the traditional view of Dawson City and the gold rush, but *London Times* correspondent, Flora Shaw, formed a different impression when she travelled there in 1898. According to her, Dawson City was a death-trap lying in wait for victims:

The insanitary conditions of Dawson, situated as the town is upon a swamp and devoid of the most elementary provisions for cleanliness and health, is a standing menace to the community. Typhoid is permanently in the town; the death-rate is abnormally high; and there are as yet no signs of any measures to be taken to avert the danger of a serious outbreak of epidemic.³

The legend of the gold rush ignored the stark reality of guileless and luckless people trampled in a stampede for gold; of the bent and broken and insane who were left behind. Their story is the seamy underside of the legend: a city forced to cope with the indigent and ill-prepared gold-seekers lured by the 'carnival of the Klondike'.

Dawson City's growth and decline, as seen through the prism of disease, allows a different Dawson City to emerge. Dawson's isolation was a cruel fact of life. It made living and working a difficult, and for some, an impossible task. Dawson's boomtown beginnings influenced the establishment and conduct of public health care for the next 20 years and more. The city burst forth, not allowed the slow, secure growth of most cities. It was born a city and became a village. Consequently, its development was stunted. Public health care only became an issue once

Dawson assumed the respectability and pretention of the 'Metropolis of the North.' By 1900 access was easier but Dawson was exposed to contagious diseases that plagued every Edwardian city. Small pox was a terrifying reality but vaccination was still suspect. All the while the federal government stood by and watched with the detachment it reserved for political and geographical backwaters; forever treating the Klondike as a sometimes rude, but always wealthy, colony. During the Great War of 1914-1918 the population dwindled and Dawson was unable to pay its own way. It was isolated and ignored by the south. Ironically, that very isolation saved it from the ravages of the great plague that swept the world in 1918; Dawson was one of the few places in the world beyond the reach of Spanish influenza.

Legend and Reality

In 1895 Dawson City was an Indian fishing camp at the junction of the Yukon and Klondike Rivers. It mushroomed out of the bog in 1896 when an American transportation and supply company based its operations at the only suitable site on the Yukon that was close to the gold fields.

When word of new strikes in the Klondike reached the world thousands responded to the lure of gold. More than 100,000 people started out for the Klondike, 60,000 reached Seattle, and 40,000 reached the headwaters of the Yukon River. In June 1898 police at the Tagish post estimated that 36,000 gold seekers travelled into Dawson. At the height of the rush a police census put the population of Dawson at between 17-18,000, with another 5,000 in mines within a fifty-mile radius.⁴

Most were Americans: clerks and bank tellers, doctors, dentists, and lawyers. They sought adventure, romance and sudden riches. What many found was typhoid, scurvy, dysentery, and pneumonia. Dawson's remoteness and subarctic temperatures exacted a heavy toll on the unprepared stampeders. The formidable trek into Dawson over the Chilkoot Pass, and the inevitable food shortages caused scurvy, malnutrition and exhaustion. The combined effect of an undernourished population and a filthy, overcrowded townsite caused much suffering. The Klondike lured the fit and unfit alike; such as the Seattle man suffering from lung trouble who believed that he might as well die making a fortune in the Klondike than remain on the shores of Puget Sound and die in poverty.⁵

By the time most stampeders arrived in 1898 the choice creeks were already staked. But for those lucky enough (or well enough) to stake a

claim the work of placer mining was unrelenting and dangerous. Little more than a pick and shovel were used to search for the motherlode. Working as partners, miners used wood fires to melt the permafrost and loosen the gravel and dirt to open a mine shaft. One man worked with a pick and shovel in the shaft, chipping away the ore frozen in gravel that was raised to the surface by his partner. The man on the windlass, exposed to the wind, snow and cold, suffered snowblindness, frostbite, and gangrene. The miner below the surface risked suffocation from the smoke and toxic fumes, some were buried alive by cave-ins. Gravel was stock-piled until spring when wooden sluice boxes were built to separate the gold from the ore taking advantage of the spring run-off. It was an uncertain future if no gold was found.

Miners lived in crude log shacks chinked with moss, usually without a window and heated with a tin Yukon stove. The air in the cabin was either stifling hot or freezing cold. For example, a cabin built of green wood, exposed to the heat of the stove, dripped incessantly all winter. A thick layer of ice formed on the walls, ceilings and floors and left the miners perpetually damp and cold — an atmosphere conducive to illness. Flora Shaw observed: "The contrast between the wealth which men have come to seek and the extremities of poverty in which they are content to live is striking."⁶ Men and women were driven to suffer the hardships of the climb over the Chilkoot and the privations of life in Dawson by their greed for gold.

Accidents or illness on the creeks, miles from Dawson, left a man debilitated and a burden to his fellow miners. Although some miners were likely treated on the creeks, a doctor's visit cost from \$100-\$500, depending on the distance from Dawson and the patient's ability to pay.⁷ When a death occurred a miner's partner was required to fill out the Death Register in Dawson. The Register was not complete. It records only 4 deaths from typhoid in 1898, while first-hand accounts state there were as many as 9 typhoid deaths in one day. Many entries were just a number with the cryptic phrase 'remains found' or 'killed' scrawled across the page. Of the 249 deaths registered between 1898 and 1903 the cause was known in only 133 cases.⁸ Citations such as 'found dead in bunk' or 'shot himself' tell a chilling tale of life and death on the creeks. The Register attests to the loneliness, isolation and danger of a miner's life.

Good health and stamina were a miner's only assets until spring clean-up. Dangerous working conditions, a poor and unvaried diet, and demanding physical labour left miners open to a number of opportunistic diseases such as pneumonia, tuberculosis, and scurvy which attack the

undernourished and overworked. Placer mining techniques were also used to melt the frosty ground to prepare graves. The funeral cortege was a rude spruce coffin on a Yukon sled pulled to the cemetery by a team of dogs — “A sight witnessed perhaps no place else in the world.” The coffin was then lowered into the ground, “where the body will lie unchanged until the earth itself changes.”⁹

Life on the creeks was punctuated by an occasional trip to Dawson for supplies and the city’s many pleasures: gambling casinos, dance halls, saloons, and prostitutes. But what many found was disease in epidemic proportions in the summer and fall of 1898. A tent city mushroomed out of the swamp that dominated the centre of town. The mining camp became a city almost overnight and had only the crudest form of sanitation and drainage. There were only two public toilets on the waterfront for nearly 20,000 people.¹⁰ Waste and garbage were dumped into the Yukon River where many obtained their drinking water. Long, hot days under the Yukon sun turned the swamp into a festering quagmire that plagued the city from its inception. As the Commander of the Yukon Field Force, sent to Dawson to keep the peace, observed in 1898: “It seems to be nobody’s business to look after the sanitary arrangements of this town. . . . Typhoid prevails in the town and a worse epidemic may break out, as the smells are awful.”¹¹

By mid-summer 1898 typhoid fever indeed had a firm hold on the population of Dawson. But medical facilities were rudimentary and makeshift. Dawson’s only hospital, St. Mary’s, was established in 1896 by Father William Judge, an American Jesuit. Judge ministered to the miner’s frostbite, snowblindness, rheumatism, bronchitis, scurvy and typhoid. But most important to Judge, he established the hospital as “a means of leading . . . sheep back to the fold.”¹² The hospital’s beds were made of rough-sawn wood and mattresses stuffed with dried grass.¹³

That first stampede summer typhoid overshadowed all other health concerns. St. Mary’s hospital was overcrowded and understaffed; there were three to four deaths per day, with a peak of nine in one day.¹⁴ “The hospital was filled to overflowing, men were lying on the floor, and there were many in cabins, suffering from typhoid fever . . .”¹⁵

Father Judge described his hospital in letters home; “Each room held 3 or 4 sick men; the halls and aisles were filled with cots leaving just enough space for the nurses to move around.”¹⁶ By August the conditions were so bad that an addition had to be built, three stories high, 70 feet long by 20 feet wide. The hospital accommodated 125, but in August there were 135 patients.¹⁷

Good Samaritan Hospital opened in July, 1898 and was immediately filled to capacity (30 beds) with typhoid patients, and, like St. Mary's, the first patients were received before construction was complete. Good Samaritan was a sectarian institution administered by the board of St. Andrew's Presbyterian Church. Good Samaritan was reluctant to become a 'free hospital' like St. Mary's but the typhoid epidemic forced it to accept many indigents.¹⁸

In March, 1898 Bishop Bompas requested nursing help from the newly-established volunteer nursing organization, the Victorian Order of Nurses (VON). In August three nurses arrived with the Yukon Field Force. Georgia Powell, the district superintendent of the VON, took charge of Good Samaritan Hospital on 11 August, just three days after her arrival in Dawson. Her reports to Lady Aberdeen, founder of the VON and wife of the Governor General, form the best account of hospital conditions in Dawson during the epidemic:

Such sick men! Nor was the sickness all, but the filth and vermin; and we had so little to do with. . . . The few mattresses we had were taken from the convalescing men and given to the very sick men. . . . Blankets were scarce, the patients often using their own, and these were oftener than not alive with vermin. . . . No disinfectants — there were not any in the place [Dawson]; no sheets, nightdresses nor pillows.¹⁹

Powell had seen typhoid before, but nothing to compare with the misery in Dawson that summer; six severe haemorrhage cases at one time, typhoid with pneumonia, rheumatism, neuralgia, discharge from the ears and sore eyes.²⁰ The VON also attended the sick at the NWMP barracks, Fort Selkirk, and the miner's hospital at Grand Forks, forty miles from Dawson. The conditions at the Forks were worse than in Dawson:

Pole frames over which a blanket was thrown for beds, not enough blankets to keep patients warm, no sheets, no towels, nor cloth of any kind, save a few floursacks, a slop pail. . . . and a soap box for furniture.²¹

The diet consisted of boiled rice and gravy.

Typhoid thrived in such conditions, especially since recovered typhoid patients carry the disease for some time after the symptoms subside. Scurvy patients continued to increase during the epidemic and their admission to hospital assured they would contract typhoid as well.

Powell found the condition of indigent patients overwhelming. She thought them "the very lowest grade of humanity."²² Dawson's isolation meant that fresh food was difficult to obtain at best, and when

available was extremely expensive. Oranges, apples and onions cost \$1.50 each. A gallon of cow's milk cost \$16.00, and eggs cost \$3.00 a dozen. Scurvy was a perennial problem. Powell reported the situation to her superiors:

Nursing scurvy patients at best is disgusting work, under these circumstances doubly so. The scrubbing and cleansing of these miserable creatures — and how some of them would fight against the bath of which from appearances, it is doubtful they ever had had but the very first up to that time.[sic]²³

Far from home, without food or shelter, the indigents were thrown on the charity of the missionaries and volunteers in Dawson.

There was no shortage of doctors in Dawson; nevertheless health care remained inadequate. The Klondike gold rush was unique in that it attracted an inordinate number of professionals. At the peak of the gold rush in 1898 there were an estimated 70 physicians in Dawson, or 35 per 10,000 population.²⁴ In 1901 there were 30 doctors for a population of 9,000. For the same period Vancouver averaged 12-18 doctors per 10,000 population.²⁵ Up to 1918 Dawson had more than double the American average, but the plethora of doctors did little to ease the strain on medical services. Doctors in the early years functioned as most stampeders: they were there to 'clean up and clear out'. Tappan Adney travelled to Dawson in 1897 for *Harpers* magazine; he stated that one doctor earned between \$1,200 — \$1,500 a month, while another who invested his earnings in mining made \$20,000.²⁶ Doctors practising in Chicago at the turn of the century earned between \$1,500 and \$3,000 a year.²⁷

Dawson was not well served by its medical profession. Along with the gambling halls and saloons, many physicians were in Dawson to mine the miners. Moreover, the nature of many illnesses was beyond the experience of the newly-arrived doctors. Scurvy, snowblindness and frostbite were certainly unfamiliar. Father Judge had lived in Alaska since 1892 and learned from the natives how to treat illnesses peculiar to the north. He used a simple but effective treatment of spruce leaf tea or raw potatoes to treat scurvy patients. Dr. J. J. Chambers, a physician working at St. Mary's, believed scurvy was caused by eating too much of one food: "The system gets out of order in consequence and the blood becomes thickened and vitiated."²⁸ Reverend Grant of the Good Samaritan hospital believed scurvy was caused by a lack of sunlight; the prevalence of the disease was due to the long dark winters.²⁹ Dr. J. W. Good, the Medical Health Officer for Dawson, attributed scurvy to the consumption of partially decomposed food, ". . . and not from the

absence of fresh vegetables, which appears to be the prevalent idea.”³⁰ Scurvy and its causes were well known to the medical profession at the time. Many of the physicians in Dawson must have been either poorly trained or perhaps some were quacks.

During the typhoid epidemic the cause was attributed to “bad living”,³¹ or arsenic in the water.³² An American physician thought the typhoid epidemic must be caused by the moss and decayed vegetation on the hillsides around Dawson draining into the river.³³ It should not have been necessary to search for the cause of the disease with Dawson in such a foul and putrid state. Outbreaks of typhoid were common in rural areas of Canada and the United States; the disease and its causes were well known.³⁴ Romance and adventure attracted people to the Klondike and doctors were likely not in Dawson primarily to practice medicine. It is impossible to know what qualified many in Dawson to call themselves physicians.

The rich were not immune to diseases such as typhoid that were bred in filth. Yet while the working poor and the indigent went to Good Samaritan or St. Mary’s, the wealthy recuperated in one of Dawson’s many private hospitals that sprang up during the epidemic. Svendgaard’s Anglo-American Hospital boasted spotless white linens, delicately patterned Haviland chinaware, hot and cold running water, damask and Turkish towels, and “the best box mattresses money could buy”; admission was by application only.³⁵ Dr. Scott opened a private hospital in November, and Drs. Bourke and Bourassa each opened hospitals in 1899.³⁶ Martha Black, a stamper who arrived in 1898 and was later elected MP for the Yukon, found that it would cost nearly \$1,000 to have her baby in a private hospital. Dawson’s public hospitals did not have facilities for women until 1900.³⁷ A doctor’s visit cost an ounce of gold or \$17.00. Unable to afford medical attendance, she gave birth alone in her cabin in the winter of 1898.

Almost as soon as the gold rush began hospital funding was an issue. In 1897 Father Judge devised a unique health insurance scheme to meet hospital construction costs. The purchase of a ticket for three ounces of gold (\$50.00) ensured health care for the year. The scheme was ideally suited for a mining camp. Miners bought their health care along with their provisions every year. But when Dawson boomed and the mining camp became a city, St. Mary’s was immediately overwhelmed and ill-equipped to meet the emergency. By July 1898, even before the typhoid epidemic reached its peak, St. Mary’s was already \$25,000 in debt.³⁸ That month Commissioner Walsh reluctantly contributed \$5,000 from the Territorial revenues to St. Mary’s rising debt. By October the debt

had risen to almost \$44,000 because 261 patients had failed to pay their bills.³⁹ Debts were crushing the pioneer hospital. The irony of the situation was not lost on the *Klondike Nugget*, when it noted, "the bulk of the work at St. Mary's Hospital has been done purely in the name of charity; and this in a land of wealth untold."⁴⁰

The funding situation had become so bad that Good Samaritan Hospital threatened to close its doors in October 1898. The Board of Managers calculated that the money on hand was insufficient to meet the debts already incurred, and that less than 15% of the patients in the hospital could pay anything for their care. They resolved to stop admitting patients.⁴¹ It only remained open when Council approved a grant to the hospital of \$5,000. It was clear that provision in the Territorial revenues for the care of the indigent sick was necessary. The crisis funding that the government preferred was inadequate to meet the needs of the growing community.

Fines levied against prostitutes and gamblers, and licence fees from saloons provided funds that were "devoted to the patients in the fever-crowded hospitals."⁴² In this way \$90,000 was raised before the end of the winter. Of the disbursements to the Commissioner from the Dominion for 1898, 48% or \$50,000, went toward the care, passage, and burial of indigents.⁴³ In his report to the Minister of the Interior Commissioner Ogilvie justified the costs: "We as a civilized Government could not allow these men to die like beasts, consequently we had to take care of them."⁴⁴ Early in 1899, to ease the drain on local revenues, the Yukon Council asked the two hospitals to submit tenders for the care of the indigent sick. St. Mary's was reimbursed at a daily rate of \$3.50 per bed, and Good Samaritan at a daily rate of \$3.00. At the same time private relief and charity functions were held to ease the hospital's debt load.

The care of the destitute and indigent sick was left to the NWMP and missionary and volunteer societies. The Salvation Army even sent their own 'Yukon Field Force' to Dawson in 1898 and built a hostel and meeting hall on 2nd Avenue to care for the luckless and penniless. Organized nursing was introduced by the VON; fraternal societies and private charity attempted to meet the shortfall in public services. Georgia Powell of the VON received instructions to raise funds to cover operating expenses in the Yukon. By March 1899 the VON headquarters in Toronto advised Powell that, "if the inhabitants of Dawson do not show their appreciation of their [nurses] services by subscribing funds . . . then they are to leave and return to Ontario."⁴⁵ The VON left

Dawson later that year, but Powell remained in Dawson employed at Good Samaritan Hospital.

The Dominion government's parsimony toward the Yukon prevented the growth and development of any permanent health care facilities. The North was never a high priority for Dominion government attention. It was at best a marginal territory sparsely populated by natives, fur traders, and a few missionaries. The government at the time was far more interested in attracting settlers for the agricultural prairie west.⁴⁶ However, once gold was discovered in the Klondike it became a colony ripe for picking. The natives were promptly shuffled onto the Moosehide 'reserve', although a treaty was never signed. Moreover, the government joined in the greedy exploitation of the Klondike by taking royalties on the gold that was mined, and reserving for itself gold that was still in the ground.

Flora Shaw embarrassed the Canadian government in the *London Times* with her pointed criticisms of the administration of Dawson. She noted the poor organization of the city:

... no roads, no reliable mail, no sanitary organization, and no clear distribution of streets and town lots in a town of nearly 20,000 inhabitants. . . . conditions which are held to be wholly unnecessary in view of the amount of revenue derived from the mines and the fact that the town is now two years old.⁴⁷

The government, however, refused to shoulder the expenses of the Yukon; it was determined to make Dawson pay its own way.

The crisis in health care, prompted in part by the typhoid epidemic, had forced the government to provide at least a measure of relief to the mission hospitals that bore the brunt of health care delivery. The *ad hoc* nature of hospital funding reflected the larger issue of proper public health safeguards.

The typhoid epidemic and the pressure it put on all of Dawson's facilities prompted leading citizens to form a board of health—if only to protect their own health and property. The Board, led by Colonel Steele of the NWMP, Dr. Thompson, and businessman, H. Grotchie, focused on the worst violations of the public health. They inspected water and food supplies, river vessels, and slaughter houses. They attempted to designate where water could be drawn and where garbage should be dumped. Their efforts did not inspire much confidence. In March the *Nugget* predicted another typhoid epidemic in the city that, "will put even last summer in the shade by comparison."⁴⁸

Only the most glaring menaces were dealt with initially. Aside from concerns for the public health there were business interests —

shopkeepers and suppliers — who were concerned with their investments. An improved townsite would only increase their property values. Attempts were made to drain the swamp in the centre of town, and ditches were dug that summer to serve as a sewer system. A permanent sewer was supposed to be built the following summer, but because of increased Council appropriations to the hospitals the permanent system was never built. Open ditches and temporary drains served Dawson for the next 20 years. The efforts of the Board of Health were also hampered by a Council chronically short of funds for public improvements. The typhoid epidemic left Dawson's two public hospitals in considerable debt, and infusions of government money were necessary to ensure the viability of the hospitals, at the expense of much needed improvements. The low priority accorded to public health planning and funding made Dawson a dangerous place to live.

'Metropolis of the North'

After 1900 many began to see Dawson as their home. With changes in gold field technology came changes in transportation for Dawson. The completion of the Yukon and White Pass Railway provided reliable rail service and by-passed the gruelling climb up and down the Chilkoot Pass. But contagious disease also found access into Dawson easier. Diseases that were all too commonplace in most Canadian cities — whooping cough, diphtheria, scarlet fever, and small pox — began to take their toll in Dawson. Although Dawson's initial isolation had protected it from some diseases, the new transportation link with the world also linked Dawson with the disease pool that plagued every Canadian metropolis.

Nevertheless, at this time life in Dawson had become appreciably easier with city improvements such as running water, electricity, and telephone service. Professional, efficient fire protection made the winter of 1900-01 the first year without a major fire. Paved streets, modern stores, and miles of dockage, "all combine to form a picture of busy, healthy, prosperous life hardly to be expected in a settlement so young and so far removed from the centres of civilization" boasted *Ferguson's Directory* in 1901.⁴⁹

Gold fields consolidation at the turn of the century spelled the end for the individual placer miner. Huge dredges squatted in the creeks spewing long tails of gravel, while powerful hydraulic nozzles tore apart the hills in search of gold. The Yukon landscape was changed forever. Consolidation of the gold fields and innovations in technology necessi-

tated electrical and telephone links and a dependable supply of running water. Utilities for Dawson City, owned by the mining companies (telephone, electricity and water), were by-products of gold field technology. The 'Metropolis of the North' made do with open ditches and drains that flooded every spring.

Dawson City incorporated in 1901, with a more manageable population of 9,000, and was finally able to raise revenue and allocate spending and quickly made public health a priority. A Medical Health Officer was appointed with a wide mandate for reform. In March and April, 1902 reports of crimes against the public health were a daily feature of the *Nugget*.⁵⁰ The sanitary crusade was enforced by Magistrate Macauley, "Warning had been given time and again, and the health of the people cannot be put in jeopardy through carelessness . . ." ⁵¹ Stiff fines of \$100.00 were levied against violators of the public health. In a letter to the editor 'Northender' observed that efficient garbage collection and removal was essential: "Since this is a permanent town it ought to be dealt with as a permanent improvement instead of in any old makeshift way."⁵²

By 1901 Dawson boasted that it was 'an unusually healthy city'. The death rate was 5.1 per 1000 (not including natives), while Ontario's rate was more than twice that, or 13 per 1000 population.⁵³ The comparatively low death rate was attributable to the great number of young men in the population. Ironically, Dawson's climate was perceived as her greatest asset in disease prevention. Most Dawsonites hailed from the dirty, congested cities of the south; the clean, cold air felt bracing and invigorating. However, the cause of most deaths in 1901 was respiratory disease and accident.⁵⁴ Hard physical labour in the forbidding Yukon climate was Dawson's greatest health problem. Dawson's isolation and population mix, not the climate, accounted for the low death rate.

Even after Dawson became the 'metropolis of the north' the *ad hoc* methods of dealing with illness and disease persisted. The insane, those whose behaviour seemed aberrant or dangerous, were committed by NWMP officers and held in custody at the Dawson gaol until they recovered or died.⁵⁵ The prevailing impression in Dawson was that suicide and insanity were unavoidable.

Living like a pauper within reach of great wealth caused some to forfeit all hope. Commissioner Ogilvie explained: "The frequent suicides in a mining camp . . . [are] the result of alternating hope and depression which must ever be the fate of most of the inhabitants of a mining region like this." Agitation in the *Klondike Nugget* for the proper care of the insane began in April 1900. On 22 April, with six patients in

custody, Magistrate Starnes suggested that Dawson was in urgent need of accommodation for the insane because the number of insane persons was increasing with surprising regularity.⁵⁶ The insane inmates disturbed the working prisoners and disrupted the gaol routine. No funds were available for their maintenance, and at a cost of \$42.00 a day to feed and board them it was cheaper to send them out to the British Columbia Public Hospital for the Insane in New Westminster. By 1911 the cost to the Yukon government for the maintenance of the insane was over \$10,000 per year.⁵⁷ In the spring and fall it was impossible to send them out so their maintenance remained an issue.

In an editorial in June the *Nugget* again raised the issue: "The mode of living adopted by thousands of men in this country is bound to be productive of insanity and there should by all means be local provisions for the care of such persons aside from the common jail."⁵⁸ Perhaps loneliness, isolation or as Commissioner Ogilvie suggested: "over-exertion and over-strain . . . incident to the rapid acquisition of gold "caused insanity."⁵⁹ But organic disease also resulted in insanity. General paresis, an organic mental disorder resulting from chronic syphilitic infection, made up 12% of all admissions to the B.C. Public Hospital for the Insane.⁶⁰ An abundance of lonely men and prostitutes in Dawson may have contributed to the problem. Perhaps syphilis was hinted at in the phrase "mode of living" in the *Nugget* editorial. Commissioner Ogilvie responded to the venereal disease problem by requiring all prostitutes to undergo monthly medical examinations and to display a certificate of health in their rooms.⁶¹

But the problem of funding to accommodate Dawson's mentally unfit persisted. Reverend Grant of Good Samaritan Hospital, prompted by concerns for the welfare of the non-violent insane that were kept in his hospital, raised the issue again later in the year. He argued that if Dawson was to be considered a progressive Canadian city—a metropolis—then it must care for the insane in a humane way. The practice of confining patients in the gaol was satisfactory when it was uncertain whether Dawson would be abandoned, but, "now that the future of Dawson is assured for many years to come, the system should be relegated to the lumber room with other mining camp and frontier make-shifts, and a proper asylum instituted."⁶²

Finally in March 1901 Commissioner Ross was given authority to establish a temporary asylum to hold patients awaiting transportation. James Smart, Deputy Minister of the Interior, instructed Ross to convert buildings vacated by the Yukon Field Force in Dawson, ". . . but of

course it is not the intention to create a regular asylum with a large staff."⁶³

The temporary nature of the solution belied the assumption that Dawson was a thriving metropolis destined for greatness, and perhaps a provincial capital. Or was it just a matter of priorities? That same year the Dominion commissioned the construction of five new buildings in Dawson. But funding to care for Dawson's sick and weak remained niggardly and provisional.

Government funding remained inadequate but at least typhoid, dysentery and scurvy were under control largely because of improvements in city services. And with the completion of the rail link from Skagway to Whitehorse, and with regular river boat service (horse-drawn stages in winter), access into Dawson was easier. The food supply was less precarious, and medical supplies and equipment were imported with less expense. Consolidation of the gold fields meant that mining was done only in summer, and labour became seasonal and imported. The spring influx of travellers and miners into Dawson began to be feared for the contagions they brought with them. Contagious disease was even more frightening considering Dawson's isolation and poor health care services.

There was a siege mentality in Dawson concerning contagious disease. In Canada in 1900 small pox was widespread and often fatal. Two cases of small pox in Dawson in July 1900 sent Commissioner Ogilvie and Dawson's leading citizens scrambling for a response.⁶⁴ Rumours of small pox and pneumonia raging in Nome, Alaska prompted authorities to establish a quarantine in Dawson. People feared strangers, many stayed shut up in their cabins and kept their children at home. Quarantine was a natural reaction to small pox, and isolation was not unfamiliar to Dawsonites; it was certainly preferable to small pox. Dawson could be quarantined completely, unlike most cities, because there were only two routes into the city. But once small pox broke out quarantine was a little like closing the barn door after the horse had fled. Quarantine was also a very expensive measure: one indigent patient quarantined and nursed for 34 days cost the Yukon government over \$900.00.⁶⁵ The steamer *Whitehorse* and her 125 passengers were quarantined for 17 days at a cost to the government of \$500.00 a day.⁶⁶ There was no price too high to pay for the protection quarantine offered in keeping disease from sweeping the inadequately served city.

Vaccination was a much more effective and less expensive measure than quarantine, but it was not until after the 1900 small pox scare that a local ordinance made vaccination compulsory. The vaccination order

was met with suspicion; police had to accompany vaccination inspectors on their rounds. But even the NWMP would not enforce the vaccination order.⁶⁷ Dr. Richardson, while explaining the necessity of vaccination, illustrated the public attitude to vaccination and, perhaps more important, the attitude toward doctors:

I don't want to appear a crank on the subject of vaccination for the reason that people will say 'Oh he has some points [vaccine] and wants to advertise himself and make some money', but I think that people who will not have their children vaccinated are criminally negligent. . . . vaccination is the only means which successfully combats the plague.⁶⁸

During a later outbreak of small pox both Dr. E. A. Thompson and the matron of Good Samaritan Hospital became ill because they did not believe in vaccination.⁶⁹ Vaccination was seen by many as an untried and potentially harmful treatment; only doctors administered the vaccine and there was little public confidence in either their methods or motives.

Fear and Disease

By 1911 Dawson City was not the bustling gold mining town it once was. According to long-time resident and writer, Laura Berton, "In Dawson itself, life had slipped a gear or two."⁷⁰ Gold production had reached its peak in 1900 and Whitehorse, at the railhead, took over as the transportation and supply centre of the Yukon. Dawson's isolation was once again intact. Circumstance and a depressed economy forced Dawson to relinquish the title 'metropolis of the north'. Dawson's declining economic significance was made painfully clear in response to an outbreak of small pox in the spring of 1911.

Small pox was brought into Dawson by two Seattle men employed by the Yukon Gold Company. Although there were only 19 cases in Dawson (and no deaths), American authorities at Skagway threatened to quarantine the whole Yukon Territory. But Whitehorse mining and railway operators wanted a quarantine imposed on Dawson alone. They feared a general quarantine on the whole Territory would stop valuable shipments of mining equipment and food supplies and ruin Whitehorse business.⁷¹ Acting Commissioner Arthur Wilson had no choice but to establish quarantine at Dawson and down river at Eagle, Alaska. Dawson was forced to quarantine itself against the world.

As a result of the quarantine Dawson was by-passed completely, at an estimated loss to business of \$250,000.⁷² Mining operations were forced

to close during the quarantine; a costly shutdown during the short dredging season.⁷³ As well, the quarantine cost the Territory almost \$20,000 for hardware, water, medicines, building supplies and salaries for medical help that staffed the emergency hospital.⁷⁴

The appearance of one case of small pox the following March 1912 prompted Commissioner Black to take steps in anticipation of another outbreak. In an attempt to forestall a quarantine that was so costly for Dawson, Black appointed Dr. H. C. Davis, Medical Health Officer at Whitehorse. Dr. Davis was instructed to enlist the aid of the NWMP and examine all persons entering the Territory, vaccinate where necessary, and exclude any that were not physically fit. "This Territory had an epidemic of small pox last year which cost a large sum of money to stamp out, practically ruined business for the year and endangered the health of the people."⁷⁵

On 25 April Black received a petition from businessmen in Whitehorse demanding that travel restrictions be removed,

. . . if the outside public hear of the vaccination order it will divert a large proportion of passengers destined for lower river points to the St. Michael [Alaska] route and cause a very heavy financial loss to the territory. Prompt action is respectfully requested to prevent reports reaching outside and killing passenger travel.⁷⁶

Black promptly ordered Dr. Davis to relax the compulsory vaccination order—the quarantine period, it seemed, had expired.

Black's attempt to anticipate and prevent an outbreak of disease in Dawson went unappreciated. With Dawson in economic recession and the population dwindling, Black had no choice but to rescind the order. Dawson was left open to the ravages of small pox because its protective isolation was removed once it became the 'metropolis of the north'. And in decline Dawson was left exposed to small pox because it could not afford the alternative.

War time exigencies forced cut backs in Prime Minister Borden's Union government subsidy to the Yukon. Grants to each hospital were cut from \$12,000 to \$16,000 annually. Good Samaritan could not operate on the reduced budget and shut its doors on 31 May 1918. Two hospitals for a population of 2,000 was unwarranted, and their consolidation as early as 1904 would have eased pressures on Council funds, but Good Samaritan was a gold rush institution that was a large part of Dawson's history; its closure affected Dawson's confidence more than her health care.

Dawson's population was "trickling from it like water from a leaky barrel", according to Laura Berton. About 200 young men left in 1914 to join the fight in Europe. And on 25 October 1918, the ocean-going steamer *Princess Sophia* struck a reef and sunk in the Lynn Canal — all 353 passengers on board were lost. Many were from Dawson's social, political, and economic elite. The *Sophia* disaster was a devastating blow to Dawson City.

For more than a month news of the *Sophia* was a daily feature in the Dawson *Daily News*. At the same time the *Daily News* followed the path of Spanish influenza as it raged across the continent and around the world. Reports of whole cities incapacitated by illness and death faced Dawson readers. Dawson waited anxiously to see which would arrive first, Spanish flu or the cold weather that would close down traffic on the Yukon River. Once the river froze the natural quarantine was achieved. In the week ending 12 October 75 residents of Seattle died of influenza and pneumonia; by the end of the month 350 were dead. The last ship of the season, the *Victoria*, from Seattle to Nome arrived 22 October. The ship was inspected before leaving Seattle and there was no sickness on the voyage. All passengers landing in Nome were quarantined for five days, and mail and freight was fumigated. Influenza struck Nome despite the precautions; on the return voyage of the *Victoria* 200 on board became ill, with four deaths in transit.⁷⁷ However, Dawson was protected by a quarantine established at Skagway on 1 November. The quarantine cost \$500.00 a month, with half the cost assumed by the Yukon government; it was a small price to pay for effective protection from the influenza epidemic.

Authorities in Dawson made what preparations they could in anticipation of the epidemic. Circulars from the B.C. Provincial Board of Health were received in Dawson giving what meagre advice was available:

Every person should endeavour to maintain the highest standards of health by taking suitable exercise in the fresh air, eating wholesome food, and sleeping with the windows open and arranged so that no draught is produced. Keep bowels regular, drink lots of water and do not worry.⁷⁸

There was little consolation in the advice, nor were there any effective measures that could be taken to prevent the disease, aside from the protection offered by Dawson's isolation.

Territorial Secretary J. A. Maltby canvassed the facilities in Dawson in case of an outbreak. St. Mary's had accommodation for 40 with a staff of eight.⁷⁹ Good Samaritan was closed and dismantled earlier that year.

There were four doctors in Dawson, and one in Whitehorse. Maltby requested the largest businesses in Dawson to submit an inventory of supplies available to equip an emergency hospital. The Yukon Gold Company had no beds available, but 25 sets of blankets and 15 mattresses. The Northern Commercial Company had neither beds nor blankets, and the N.A.T. & T. Co. had 15 beds available.⁸⁰ In case of a major epidemic Dawson was ill prepared.

Travellers into Dawson were met with suspicion and fear, and no one dared leave the protection Dawson's isolation offered. The *Daily News* headline on 26 December read: "Did The Right Thing -Stayed With The Yukon".⁸¹ Those intending to travel out for the winter were repulsed by the flu in the rest of the world. Dawson had not yet comprehended the tragedy of the *Sophia* when the influenza epidemic paralysed the north. Dawson's siege mentality was evident in an editorial in the *Daily News* on 21 January. Anyone with the flu attempting to enter Dawson should be treated like a spy or a deserter:

Shooting, in fact, would be too good for any person even trying to escape into a healthy community with the germs of that deadly malady clinging to him. . . . Now all together, prepare to fight the scourge and crush him as the Hun was crushed.⁸²

NWMP Captain Bell, who travelled to the coast in the aftermath of the *Sophia* disaster, spent five days in the Juneau morgue identifying bodies from the wreck. He sent reports of the flu to Dawson:

Flu all around us, hotels full, hospitals full, and that, on top of the horrible wreck and scenes attendant to the wreck, surely made Juneau anything but a pleasant place to reside. . . . The people of Dawson have every right to be scared of the flu. It is frightful.⁸³

There were eight cases of Spanish influenza in Juneau on 14 December, by the 21st there were over 100; it spread like "wildfire".

Death and disease were all around Dawson. The *Daily News* reported 800 cases of influenza in Prince Rupert on 19 November. Hundreds of Eskimos near Nome died, "Among the natives whole families have been wiped out. First made helpless by the disease, then without attention, they have frozen to death."⁸⁴ Police headquarters in Regina ordered medicine to be delivered to the police post at Fort McPherson. Two natives were dispatched, doubtless employed because no one else would venture from Dawson's quarantine security. In any case they were ordered not to return to Dawson once their mission was complete. Dr.

Lachapelle proclaimed that, "all Indians are to be kept out of Dawson who are not living here."⁸⁵

In January 1919 influenza broke out among Copper River Indians of the interior, and it was feared they would spread the disease through their trade contacts. The NWMP imposed a strict quarantine on the group; their fate was sealed. Similar incidents occurred throughout the north in the fall and winter of 1918.⁸⁶ It was estimated that in some Alaskan villages 20-50% of the population died of complications from Spanish influenza.⁸⁷

Dawson was spared the horrible effects of the flu in the winter of 1918-1919. With the spring influx of travellers into the Yukon Valley influenza did break out but it did not strike the city like the 1918 epidemic which ravaged the coast.⁸⁸ Dawson's isolation, once anathema to good health, became its only protection against the ravages of Spanish influenza whose toll was more than 50 million worldwide.

After 1918 Dawson remained but the population continued to decline. In the 1935 Parliament Martha Black sat as the Conservative member for the Yukon — there were only 1800 voters in the whole Territory. Dawson City had come full circle. Dawson's initial isolation, although it caused much hardship, served as a cocoon that encircled and protected Dawson from disease. In later years with dependable access in and out of the city, Dawson protected itself through vigilance and public health crusades. And in its decline Dawson's isolation, reimposed through circumstance, ensured its survival from the last great plague. Spanish influenza most certainly would have devastated the poorly served city. Health care was administered as the need arose because Dawson was an isolated, underdeveloped Canadian backwater, only important for the gold that funnelled into government coffers.

In popular imagination and historical accounts the legendary Dawson City, with its dance hall girls and Klondike Kings, survives. But this vision does not recognize the suffering and hardship which many experienced. Dawson City as seen through the prism of disease contrasts sharply with the legend. The reality of life in Dawson City was often severe and usually unpleasant — it was easily forgotten. Upon her return to Dawson City in the early 1920's Laura Berton observed,

If many of the buildings were empty, the hospital was full, not of patients, but of old men. . . . All had come over the trail in '96 and '97 and '98 and now they could be seen sitting on the verandah in the sun staring out at the river which had brought them here.⁸⁹

This was a time when Dawson City had no future, just a past that became more wonderful and exotic each time it was retold.

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NOTES

- ¹ I would like to thank Professor W. A. Waiser for his patience, encouragement, and his thoughtful criticisms. Any errors and omissions are of course my own.
- ² Pierre Berton. *Klondike: the Last Great Gold Rush, 1896-1899*. Toronto: McClelland & Stewart, 1972. pp. 332, 398.
- ³ Flora Shaw. *London Times*. 23 September 1898. p. 10.
- ⁴ Tappan Adney. *The Klondike Stampede: 1897-1898*. New York: Harper Bros., 1900. p. 386.
- ⁵ A. C. Harris. *Alaska and the Klondike Gold Fields*. Toronto: Coles Publishing Co., 1972. p. 50.
- ⁶ Flora Shaw. *London Times*. 23 September 1898. p. 10.
- ⁷ Sam Dunham. *The Alaska Goldfields*. Anchorage: Alaska Northwest Publishing Co., 1898. p. 33.
- ⁸ Public Archives of Canada (hereafter PAC). "Yukon Territorial Records, RG 91, reel 2980, vol.225, Alphabetical Death Register, 1898-1903".

CAUSE OF DEATH	1898	1899	1900	1901	1902	UNKNOWN	TOTAL
Accident	-	11	8	3	-	2	24
Pneumonia	2	1	15	6	1	-	25
Typhoid	4	9	6	1	-	-	20
Drowning	5	7	4	-	-	-	16
Foul play	-	6	4	2	-	1	13
Suicide	1	1	4	1	-	1	8
Unknown	23	26	24	10	8	25	116
Other	3	7	14	3	-	-	27
TOTAL	38	68	79	26	9	29	249

PLACE OF DEATH	1898	1899	1900	1901	1902	UNKNOWN	TOTAL
Hospitals							
St. Mary's	6	6	18	11	7	-	48
Good Samaritan	6	11	13	4	1	-	35
Other*	3	5	2	1	-	-	12
Creeks	9	27	28	6	-	5	75
Dawson	2	8	9	3	-	1	23
Unknown	13	14	6	-	2	21	56
TOTAL	39	71	77	25	10	27	249

* Other — Grand Forks Miners Hospital, Anglo-American Hospital, Miss Hannah's Private Hospital, Fort Selkirk Barracks Hospital.

⁹ Tappan Adney. *The Klondike Stampede: 1897-1898*. p. 351.

¹⁰ *Ibid.* p. 429.

¹¹ PAC. "Victoria Order of Nurses, Minute Books for Board of Governors and Executive Council." Lt.Col. Evans, Yukon Field Force, to Lady Aberdeen. n.d.

¹² Reverend C. Judge. *An American Missionary: A Record of the Work of Rev. H. Judge, S.J.*. New York: Foreign Missionary Society. 1907. p. 215.

¹³ *Ibid.* p. 202.

¹⁴ *Ibid.* p. 232.

¹⁵ Tappan Adney. *Klondike Stampede*. p. 429.

¹⁶ Rev. C. Judge. *An American Missionary*. p. 232.

¹⁷ *Ibid.* p. 239.

¹⁸ Hal Guest. *A History of Dawson, Yukon Territory*. Parks Canada. n.d. p. 253.

¹⁹ Theodore Rose. *From Shaman to Modern Medicine: A Century of the Healing Arts in British Columbia*. Vancouver: Mitchell Press. 1972. p. 68.

²⁰ *Ibid.* p. 67.

²¹ *Ibid.* p. 68.

²² PAC. "Victorian Order of Nurses, Minute Books". Report by Georgia Powell. 1898.

²³ *Ibid.*

²⁴ Adney. *The Klondike Stampede*. p. 429.

²⁵ Margaret Andrews. "Medical Attendance in Vancouver, 1886-1920". *Medicine in Canadian Society*. Ed. S. E. D. Shortt. Montreal: McGill University Press. 1981. p. 419.

²⁶ Adney. *The Klondike Stampede*. p. 350.

²⁷ Andrews. "Medical Attendance in Vancouver". p. 426.

²⁸ Hazard Wells. *Magnificence and Misery: A Firsthand Account of the Klondike Goldrush*. Ed. R. Dodd. New York: Doubleday & Co. 1984. p. 130.

- ²⁹ *Klondike Nugget* (hereafter *KN*). 13 May 1899.
- ³⁰ *Canadian Sessional Papers* (hereafter *CSP*). 1900. "NWMP Report, Part II, Appendix "G". Report of Dr. J. W. Good, Health Officer, Dawson, 26 December, 1899.
- ³¹ Sam Dunham. *Alaskan Goldfields*, p. 33.
- ³² P. T. Rowe. "The Yukon Country". *The Chautauquan*, 28 (4). January 1898.
- ³³ Luella Day. *The Tragedy of the Klondike*. New York: n.p. 1906. p. 73.
- ³⁴ Rose. *From Shaman to Modern Medicine*. p. 33. Perkins Bull. *From Medicine Man to Medical Man*. Toronto: George McLeod Ltd. 1934. p. 280.
- ³⁵ *KN*. 3 December 1898.
- ³⁶ *KN*. Index to Advertisers. 1897-1903.
- ³⁷ *Yukon Sun*. 24 April 1900. p. 6.
- ³⁸ *KN*. 16 July 1898.
- ³⁹ Guest. *A History of Dawson*. p. 254.
- ⁴⁰ *KN*. 18 January 1899.
- ⁴¹ Dawson Museum and Historical Society. Good Samaritan Hospital: "Minutes of Meetings". 28 October 1898.
- ⁴² Colonel S. B. Steele. *Forty Years in Canada*. Toronto: McClelland, Goodchild and Stewart. 1918. p. 323.
- ⁴³ D. R. Morrison. *The Politics of the Yukon Territory, 1898-1909*. Toronto: University of Toronto Press. 1968. p. 22.
- ⁴⁴ *Canadian Sessional Papers*. 1900. 33u. Copy of the report of Wm. Ogilvie, 20 September 1899.
- ⁴⁵ PAC. Victorian Order of Nurses. Minute Book for the Board of Governors and Executive Council, 8 March 1899.
- ⁴⁶ Government generally relied on voluntary funding for hospital development in frontier areas. However, a North West Territorial government grant for hospitals was in place by 1892 even though only Medicine Hat was qualified at the time. Joan Feather. "Hospitals in Saskatchewan in the Territorial Days". *Saskatchewan History*, 60 (2). 1987. p. 70.
- ⁴⁷ *London Times*. 23 September 1898. p. 10.
- ⁴⁸ *KN*. 4 March 1899.
- ⁴⁹ M. L. Ferguson. *Directory: Dawson, Yukon Territory and Alaska, 1901*. p. 55.
- ⁵⁰ *KN*. 23, 24, 25 April 1902.
- ⁵¹ *Ibid*. 7 February 1902.
- ⁵² *KN*. 1 June 1901.
- ⁵³ *KN*. 11 March 1901. "Annual Report Public Health".
- ⁵⁴ *Ibid*. 11 March 1902.
- ⁵⁵ PAC, RG 91, reel M2853, v.35, file 24854. "Maintenance of the Insane". Commissioner Ogilvie to Minister of the Interior, 10 July 1899.
- ⁵⁶ *KN*. 22 April 1900.
- ⁵⁷ PAC, RG 91, reel 2826, v.1, file 66. "Yukon Council, 1911". Macdonald to Commissioner, 8 March 1911.
- ⁵⁸ *KN*. 14 June 1900.
- ⁵⁹ PAC, RG 91, reel M2832, v.8, File 1336. "Maintenance of the Insane". Commissioner Ogilvie to the Minister of the Interior, 10 July 1899.

- ⁶⁰ Rose. *From Shaman to Modern Medicine*. p. 145.
- ⁶¹ *KN*. 26 November 1899.
- ⁶² *KN*. 13 December 1900.
- ⁶³ PAC RG 91, reel M2832, v.8, file 1336. "Maintenance of the Insane". James Smart to J.H. Ross, March 1901.
- ⁶⁴ PAC, RG 91, reel M2875, v.67, file 7. "Small Pox 1900-1904". Ogilvie to Wood, 6 July 1900.
- ⁶⁵ *Ibid*. 20 December 1900.
- ⁶⁶ *Ibid*. 29 July 1902.
- ⁶⁷ *Ibid*. Montreal, perhaps the unhealthiest city in North America in 1900, did not institute compulsory vaccination until 1901, but the order was ignored. Terry Copp, *The Anatomy of Poverty: The Condition of the Working Class in Montreal 1897-1929*. Toronto: McClelland and Stewart Ltd. 1974. p. 91.
- ⁶⁸ *KN*. 4 October 1900.
- ⁶⁹ Dawson City Museum and Historical Society. Thora Mills. "Gold Rush Nurse". Dawson City: n.p., n.d. p. 12.
- ⁷⁰ Laura Berton. *I Married the Klondike*. Toronto: McClelland and Stewart Ltd. 1954. p. 144.
- ⁷¹ PAC, RG 91, reel 2876, v.67, file 8, pt.2, "Public Health Generally". Whitehorse operators and businessmen to acting Commissioner A. Wilson on 28 June 1911.
- ⁷² Guest. *A History of the City of Dawson*. p. 266.
- ⁷³ *Ibid*.
- ⁷⁴ PAC, RG 91, reel 2876, v.67, file 8, pt. 2. 10 July 1911.
- ⁷⁵ *Ibid*. George Black to H.C. Davis, 3 April 1912.
- ⁷⁶ *Ibid*. 25 April 1912.
- ⁷⁷ *Dawson Daily News* (hereafter *DDN*). 6 November 1918.
- ⁷⁸ PAC, RG 91, reel M2875, v.67, file 5, "Influenza Epidemic, 1918-19. Knight to Inspector Bell, 11 January 1919.
- ⁷⁹ *Ibid*. Sister Mary Mark to Territorial Secretary, 26 November 1918.
- ⁸⁰ *Ibid*. 4 December 1918.
- ⁸¹ *DDN*. 26 December 1918. p. 2.
- ⁸² *DDN*. 21 January 1919.
- ⁸³ *Ibid*. 21 December 1918.
- ⁸⁴ *DDN*. 23 December 1918.
- ⁸⁵ *DDN*. 26 November 1918.
- ⁸⁶ R. Fumoleau. *As Long as This Land Shall Last*. Toronto: McClelland and Stewart Ltd. 1973. p. 131.
- ⁸⁷ A. W. Crosby. *Epidemic and Peace*. Connecticut: Greenwood Press. 1976. p. 256.
- ⁸⁸ *DDN*. 21 March 1919.
- ⁸⁹ Laura Berton. *I Married the Klondike*. p. 144.