



Canadian Association for the History of Nursing

Association canadienne pour l'histoire du nursing

Newsletter

Volume 16, Number 1, Spring 2003

President's Report by Carol Helmstadter

As one of CNA's special interest groups, we are required to submit an annual report every April. As I completed the report, I thought some highlights might be of interest to our members because the report does indicate how much we have accomplished in our fifteen years as an organization.

Founded in 1987, CAHN/ACHN held its first annual conference in 1988 in Prince Edward Island. Monica Baly, then the leading Nightingale scholar in the world, was the Hannah Lecturer. The Hannah Institute for the History of Medicine has supported our keynote speakers at every conference since that time. We have nurtured very successful local groups in British Columbia, Alberta, Manitoba, Ontario and New Brunswick which give us, as the national organization, a great deal of support in promoting our objectives.

These objectives are essentially threefold: (1) to promote the study of the history of nursing, (2) to create a supportive network for scholars working in the field of nursing history, and (3) to create through the development of nursing history a wider awareness of the major contributions nurses have made to Canadian society.

While many volunteer groups are having difficulty fielding boards, we have been extremely fortunate in finding people committed to nursing history who have devoted a great deal of time to our organization. Our newsletter editors publish two fine editions each year. Our treasurer has put in huge amounts of time balancing our books and planning for a fiscally sound future. Our secretary organizes our two annual teleconferences and competently records them, no easy task when one can't see who is speaking. Our vice-president co-ordinates our annual conferences and organizes future conferences, again a job which is far more complicated than it sounds. Our membership chair also has a difficult job, developing membership, keeping records which provide the information which CNA requires, and which our members frequently do not give us. Past presidents Diana Mansell and Lynn Kirkwood have worked long and hard maintaining nursing history records and are currently collaborating with the Museum of Civilization in Ottawa for a nursing history show in 2005.

In 2002, we awarded our \$1000 Allemang Scholarship to Florence Melchior for her work on student labor at two Alberta hospitals in the early 20th century. This scholarship was made possible through the generosity of one of our founding members, Dr. Margaret Allemang. Contributions from our members have enlarged her original gift of \$5000, enabling us to make an annual award.

We held a very successful joint conference with the Canadian Society for the History of Medicine in Toronto in May 2002. The final day of the conference was a joint session with the Canadian Gay and Lesbian Society and the Canadian Society for the History of Science. The participation of CAHN/ACHN in the wider field of historical scholarship is, I believe, one of the signs that we are achieving our goals.

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JOINT AAHN-CAHN CONFERENCE IN MILWAUKEE

September 19-21 2003

The conference promises to be a very stimulating and very enjoyable affair. The paper presentation program has not yet been finalized, but other parts of the program are in place.

There will be a pre-conference workshop on Thursday, September 18. Pat d'Antonio, the editor of Nursing History Review, will discuss publishing articles in journals, Sandra Lewenson will give helpful suggestions on publishing books, and Barbara Brodie will detail the basics of writing abstracts. I attended a similar workshop at the AAHN Conference at the University of Virginia two years ago and found it extremely helpful. I would strongly encourage those who can find the time to take advantage of this opportunity.

Keynote speaker is Canadian scholar, Professor Lynn McDonald, editor of The Collected Works of Florence Nightingale. This project entails publishing, in book form, sixteen volumes of selected Nightingale writings and plans are to publish all of her work in electronic form, making it available to anyone anywhere in the world. Three of the volumes are already in print and two more are in press. Drawing on over 150 archives and collections all over the world, this project presents a very complex and interesting picture of Nightingale in a scholarly way. Anyone who has worked on Nightingale knows how hard it is to strip the myth away from the real person. Professor McDonald is better qualified than anyone in the world today to do this. The lecture should have wide appeal for anyone interested in historiographical problems.

The hotel in which the conference will be held, the Pfister Hotel, is a historic hotel, built on the grand scale in 1893. Built with Italian and Algerian marble, it is a fine example of the Belle Epoque style. It has a fine collection of 19th and early 20th century art on display in its halls and corridors. The hotel has five restaurants and bars, of which Celia is a first class restaurant and Blu, the rooftop bar, commands a beautiful view of the city.

We urge you to visit the website (www.aahn.org) and make every effort to attend.

Upcoming Conferences

2004 • Toronto • Kate McPherson, on very short notice, has graciously offered to organize the conference at York University in Toronto Friday June 11 through Sunday June 13. We are especially encouraging students to attend and/or submit abstracts. There will accordingly be a special student rate for the conference, and rooms can be booked in the York dormitories as well as in the conference hotel.

Please watch for further details on our website, www.ualberta.ca/~jhibberd/CAHN_ACHN. We will have more information in the fall. The conference had been planned to be held in conjunction with the 2004 International Research Conference at the University of Toronto, but this conference has been postponed until 2005.

2005 • Ottawa • This will coincide with the Museum of Civilization's launch of their nursing history project.

2006 • Vancouver • Sheila Zerr and the BC History of Nursing Group will host this conference.

AAHN-CAHN Conference Schedule

Thursday, September 18 • 12:30 - 4:30

Preconference

Presentations and Publications: How to succeed.

Writing Abstracts: Barbara Brodie

Writing for Journals: Pat D'Antonio and Barbara Mann Wall

Writing books: Sandra Lewenson

Friday, September 19 • 2:30 - 6, 7:30 - 9:30

Opening, awards, Keynote by Lynn McDonald, Plenary session

Reception

Saturday, September 20

3 paper sessions

Banquet and auction at night.

We will try to get a room for the CAHN meeting at lunch time Saturday or 4:30 after the papers end.

Sunday, September 21

Sunday morning AAHN general meeting

There are 20 papers, presenters are 2 - Ireland, 1 - Finland, 7 - Canada, 9 - USA. There are posters, vendors, and a silent auction.

Auction items can be sent to:

Laurie Glass

School of Nursing

UWM

1921 E. Hartford Ave.

Milwaukee, WI 53211

Items from CAHN members will be labeled to ensure you get the money. All transactions need to be in US dollars. Charge cards, checks must be from US banks.

Hotel: Pfister Hotel in downtown Milwaukee. \$167 single or double. \$219 for a suite. Call 1-800-558-8222. You are with the History of Nursing group. Reservations should be made by August 17. For further information, please contact Laurie Glass at lglass@uwm.edu.

Florence Nightingale's 180th birthday, May 14, 2000: A toast to her legacy

Excerpts from an address to an AARN Educational Trust fund-raising dinner

by *Judith Hibberd*

I am not a Nightingale scholar, just a Nightingale nurse i.e., "trained" at St. Thomas' Hospital in London and conditioned to refer to her, always, as Miss Nightingale. Controversial as her legacy seems to be, I required my graduate students to read Lytton Strachey's short biography of Miss Nightingale from his book *Eminent Victorians* (Strachey, 1986). I later discovered that Natalie Riegler (a Canadian nurse historian, also of some eminence, but not Victorian) declared this biography to contain "deliberate errors and fallacies" and that although written with "brevity, wit, and irreverence" it added nothing to our understanding of her life and character (Riegler, 1990)....

Given her ideas about the importance of the environment, it is surprising that Miss Nightingale settled for St. Thomas' Hospital as the site for her Training School and Home for Nurses. It was funded, independently of the hospital, from the Nightingale Fund. After the Crimean War, a grateful nation amassed \$44,000 from public and military donations for Miss Nightingale to further her reforms in nursing. St. Thomas' hospital at that time was 600 years old and had survived the Black Death, the Dissolution of the Monasteries, the Plague, and the Great Fire of London. This stalwart hospital also survived 15 direct hits from German bombs during WWII.

On January 11, 1859, about one year before the Nightingale Training School was established, the Charing Cross Railway Company gave the hospital notice that it was applying for an Act that would enable it to run a new line across the North West corner of the hospital grounds. The hospital governors were furious, and to cut a long story short, they agreed to be compensated by the Railway Company for not just the North West corner, but for the whole hospital site for the sum

of £296,000, and they agreed to relocate the hospital. Long drawn-out arguments continued about whether a reprieve could be had, but in the end the hospital had to scramble into temporary quarters while a permanent site for the new hospital could be found.

These temporary digs were in the former Surrey Gardens Music Hall, and as such were far from perfect. The main building was roofless due to a fire, and the remaining buildings had previously housed a small zoo. The giraffe house became the cholera ward and the elephant house became the dissecting room (McInnes, 1963, p. 105). The Hospital Governors renovated the zoo section to accommodate 200 patients, and continued the search for a building site. Six sites were found, and the choice was narrowed down to one in the country and a slim strip of land on the south side of the river opposite Westminster.

The latter was selected, despite the work that would have to be done to shore up the Embankment in front of the proposed hospital. Queen Victoria was expected to lay the foundation stone for the new building. The Queen's physician clearly had some misgivings of his own when he wrote to Miss Nightingale saying: "I cannot think the bank of a muddy river the best place for a hospital. It may get air, but not of the best kind at any season--in the summer loaded with the emanations from the river [meaning the stench of raw sewage], & in the winter loaded with moisture, the smoke of the city, & the chilling east wind" and then he added "but the Queen need not be told that or any part of the unfortunate story" (McInnes, 1963, p. 111).

The first biographer of Miss Nightingale, Sir Edward Cook, reported that she chose St. Thomas' Hospital because it was rich,

large, and well managed, and because the matron, Mrs. Wardroper was a woman after Miss Nightingale's own heart. Baly (1986) challenges these reasons saying that none was in fact true. According to Baly, Miss Nightingale advised the Governors to build the hospital in the country but her advice was ignored. Whatever the real reasons were, the building of a new hospital must have been a great enticement to Miss Nightingale, given her interest in the design of hospitals....

...Her legacy of 200 books, papers, and pamphlets that Miss Nightingale published during her life time, often at her own personal cost, remains a great source of information and inspiration. She wrote countless letters and notes, many of which she copied - all in long hand. Imagine what she could have done with a computer. For a woman with a chronic and often incapacitating illness, (she suffered from a range of recurrent symptoms including: fatigue, weakness, fainting spells, insomnia, anorexia, nausea, sciatica, palpitations, dysentery, neurasthenia, heart problems, feverish episodes, and severe back pain (Veith, 1990)), her prodigious work is still debated, and her birthday routinely celebrated....

Her legacy with respect to the education of nurses has been sharply questioned by recent historians. For instance, Baly (1986) dispels what she says are myths about the Nightingale Training School's successes which, she says, were perpetrated by Miss Nightingale and the Nightingale Fund Council. She points to the 196 nurses entered into the register in the first 10 years of the program, 64 of whom were dismissed (five for insobriety). Several nurses died during or shortly after the one year of training [probably from drinking the water!], and few made any mark on nursing (p. 219)....

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Nightingale References

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Caps Needed for Educational Programmes at the Canadian Museum of Civilization (CMC)

The Canadian Nursing History Collection at the CMC includes over 250 nurses caps. As part of our permanent collection, they must be carefully preserved. We would also like to have caps for our "living history" collection, which we could use for educational programmes and demonstrations. If you are interested in donating a cap for these purposes, please contact:

Tina Bates
Canadian Museum of Civilization
P.O. Box 3100, Station B
Hull, Quebec, J8X 4H2
Fax: 819 776-8300
christina.bates@civilization.ca

Call for "Vignette" Submissions, History of Canadian Nursing, 1608 to the Present

We are working on a book on the history of nursing in Canada, to be published in French and English editions in 2005 by the Canadian Museum of Civilization and an outside publisher, and edited by Christina Bates, Dianne Dodd and Nicole Rousseau. Within each chapter, we plan to include short "vignettes" or sidebars featuring specific people, events and themes.

Each vignette will tell an interesting story - avoiding a list of facts and dates - using a narrative and anecdotal tone. The vignette should also illustrate some important theme in the history of nursing in Canada. A biographical vignette could be a brief portrait of someone who has had a significant impact on nursing, for example nursing education leader Kathleen Russell, or a nurse who has had a unique approach to nursing, such as outpost nurse, Myra Bennett. An event could be either a pivotal point in Canadian nursing such as the founding of a religious community devoted to health care, or the achievement of registration legislation in the 1920s. An event could also show nurses playing an important role, such as during the Halifax explosion, the polio epidemic, or D-Day. Vignettes should be very focused. For example, a military nursing vignette could focus on a specific location, such as the Canadian hospital ship, the Letitia.

We are particularly looking for vignettes relating to specialized nursing, male nurses, nurses of colour, nursing in the international scene, Aboriginal nurses, mental health nursing, children's nursing and military nursing prior to 1885.

We will choose approximately 25 vignettes for the book. However, as we value the efforts that go into all the vignettes, we hope to find an alternate venue to publish any we are unable to include in the book. Submissions in French or English are welcome.

Length

Texts should be 200-300 words (no more than 300), doubled spaced, without endnotes. Authors may include one or two pertinent publications related to their topic, as sources for additional reading, however, the editors reserve the right to omit those which have already been referred to elsewhere in the book.

Format

Font: Times New Roman

Please avoid use of macros or other complicated formatting

Style: Chicago Manual of Style (History, not Scientific) with Canadian spelling

Illustrations

We encourage vignette authors to include one illustration, for example an archival photograph, painting, photograph of artifact or site, portrait. Please provide a caption with complete references. Authors are responsible for copyright clearance. Final submission of 8x10 black and white glossy photograph with copy of copyright clearance is required by February, 2004.

Contribution deadline: September, 2003.

Editing Process

All submissions will be subject to editing for length, style and content. Authors will have the opportunity to review changes to their copy.

Submit to:

Dianne Dodd
Historian, Parks Canada
5th Floor, 25 Eddy St.
Gatineau, Quebec
K1A 0M5
dianne_dodd@pch.gc.ca

Sample Vignette

For more information, sample vignette, and book chapter outlines, contact Dianne Dodd, above.

Book Review

Sister Heroines, The Roseate Glow of Wartime Nursing 1914-1918, by Margaret Barron Norris. Published July 2002 by Bunker to Bunker Publishing, 4520 Crowchild Trail SW, Calgary AB T2T 5J4. Cost \$22.95 plus GST (no mention of S&H). Check Website www.bunkertobunker.com

-- Reviewed by Glennis Zilm

A few years ago, Margaret Barron Norris rediscovered many of her mother's World War I mementos. Jessie Barron had graduated from Calgary General in 1910 and served overseas, first with the Queen Alexandra's Imperial Military Nursing Service Reserve and then with the Canadian Army Medical Corps. Throughout her life, Jessie Barron kept several badges, medals, and photos of her wartime nursing service, including an autograph album with entries from Malta and England – but she had rarely talked of her experiences. Margaret Norris, author of several histories of organizations, such as the Calgary Council of Women, decided she should pursue these experiences for a possible book.

At first she could find little data about her mother's service. For example, despite the family documents that showed her service records, she was not listed on the Roll of Honour at Calgary General Hospital nor was she mentioned in the monthly notations in *The Canadian Nurse*. Margaret Norris persevered with her digging into primary sources – and, in doing so, uncovered the untold and fascinating stories of several other nursing sisters from Calgary. She found personal diaries, letters, military records, and newspaper clippings, augmented by a few published accounts by nurses. The research is thorough and wide-ranging, and shows Mrs. Norris' familiarity with local, provincial, and national archives, including some hard-to-navigate archival sources.

Sister Heroines tells the wartime stories of 28 young Calgary nurses who served on

the Western Front, in the Eastern Mediterranean, in England, and in Canada. Only one chapter is devoted to Jessie Barron, although most of the illustrations in the "Album" section come from Jessie's records. However, Mrs. Norris also included as many photos of the Calgary nurses as she could find.

Although the book concentrates on the Calgary nurses, this is one of the most inclusive accounts that I have read in a long career of research touching on nursing in World War I. Although Mrs. Norris is not a nurse, she has researched and included much more information about actual day-to-day nursing care than is found in most other accounts. Her references indicate wide reading, and the reader benefits from her skills in pulling together accounts from disparate sources and incorporating them into the background. Little has been published about the "home-front" hospitals for the injured and wounded sent home to Canada. Thus, the account of Calgary's Hotel Ogden, which was donated "for the duration," suggests new trails for those of us reading almost a century later. Other interesting insights came through the story of a Calgary nurse who, rather than wait and go through time-consuming routine channels, simply packed up and traveled to England and then France to be near her newly-wedded officer husband. She ended up working as a volunteer first in England and then in a French hospital run by a Catholic Order of nuns, with quick trips home to Calgary to raise money to keep the hospital open.

Sister Heroines is an interesting, moving, well-written, and highly readable history. More than once I was moved to tears by the stories, which Mrs. Norris has woven into an appealing and engrossing whole. The photographs, illustrations, and maps are excellent and give additional depth. This excellent book is not to be missed by anyone with even a passing interest in Canadian military nursing history.

Book Review

Nursing, Physician Control and the Medical Monopoly. Historical Perspectives on Gendered Inequality in Roles, rights, and Range of Practice. Thetis M. Group and Joan I. Roberts. Indian University Press. Pages 514. Price \$59.95.

A review by Peter Warren, M. A., M. B., Director, History of Medicine Program, University of Manitoba.

In the last century women showed that they had the competence to fill any job save those of brute strength; in this century they ought to realise the recognition and rewards this deserves. One of the first opportunities for women to create a profession was nursing. This book has as its theme an important issue: the relationships in the delivery of health care between the mainly male physicians and the mainly female nurses. It traces the evolution of this association from the dawn of time until the end of the last century. Its focus changes from the origins of health care in Classical Europe, the emergence of nursing reform in England and then concentrates on the United States. There are some references to Canada. This book is the second of a series by these authors. The first was *Feminism and Nursing* and the next will be *Gender and the Nurse-Physician Game*.

The book is divided into three parts "Exposing the Meretricious Lies", "The Purposeful Move toward Dominance" and an "Outdated, Burdensome Model of Monopolistic Control". In all there are ten chapters. There are 29 pages of references. There are inevitable omissions, for instance any article by Carol Helmstadter who so much has explained the evolution of the British nursing reforms in the 19th century.

The authors have read and reviewed a large number of pertinent books and papers to make their case that medicine, as a male profession, has gone out of its way to keep nurses, as potential competitors,

Continued on next page

Book Review, continued

in a subordinate role in health care. Each chapter opens with a useful statement as to what it will contain before coming to the essence of the argument.

However, their text is detailed, and this leads to density that seemed repetitive and that I found hard to read. There is ample evidence that male physicians condemned themselves out of their own mouths and I can add to their armamentarium of comments. For instance, Robert Barnes in the *Lancet*: (*Lancet* 31, Jan 1880) "Man's ambition and daily work is the contest with the surrounding world, physical and moral; the ambition and work of women, more restricted, is the study and conquest of man."

The book begins with the quite acceptable creed that women have always been the mainstay for the care of the sick; what Sioban Nelson titled "Say Little, Do Much". This has been sorely neglected by historical medical history. But we must ask, were these women just caring, or did they in fact contribute to the effective control and relief of disease? Mother Theresa is certainly a recent example of the value of caring for the sick even when neglecting the efforts to cure. Unfortunately, because women were too often kept illiterate, we have no clear record of that era, and the historian is hard put to do justice to their contributions. Even then Group and Roberts have some notable omissions - for instance, no mention of Trotula of Salerno. That women had folk remedies is evident from William Withering's acknowledgement that he discovered Digitalis from the remedy

of a local woman - but it was he who identified the key ingredient and amassed the evidence of its efficacy.

The main criticism I have of the book is that it does not give me a clear picture what the authors really think nursing is, and what it can do - they should have heeded Nightingale's Title "Notes on nursing: What it is and What it isn't". They argue that nursing is different from medicine, but then use medical criteria to prove that in head to head studies, nurses do a better job of providing medical care than physicians. The question I have for such studies of nurses working with hypertension or in geriatrics, is who devised the protocols or guidelines? Perhaps physician are best at diagnosing a disorder and how it might be corrected, while nurses are best at applying the remedy and helping patients use it. I believe that nurses do work differently from physicians - this is presumably due to different emphasis in their education, as well as possibly being more often female, since female physicians have been found to practice differently from male doctors.

The ultimate chapter in the book argues strongly that nurses will fill the gaping U.S. and growing Canadian, void in primary care. In the USA, the insurance companies reject this, while in Canada there is hope, for Romanow supports it. Canadians know well that Americans have a very different approach to the cost of health care - physicians are highly paid there. In Canada, the gross earnings of a family physician is \$160,000 (Manitoba 2002) of which up to 40% is

for expenses, so Nurse Practitioners may not be cheaper.

In the end, I found this book disappointing for like Ophelia, it would not win over those who need converting. It seems when a historian belongs to one of the "ism" schools (patriotism, Marxism, feminism) then history is black and white. But in reality, the more erudite history is one of grays. Both sides have their case and compromise is needed to succeed. In 1880, the editor of the *Lancet* could write "the natural tendency of the craze for lady nursing is to place the nurses first, the physicians and patients last". In 2002, the editor could write "Doctors are notoriously protective of their power and prestige. Nurses, meanwhile, have been one the most under-recognized and undervalued groups in the health service."

The Florence Nightingale Pledge of the American Nurses' Association pledges nurses to aid the physician in his work - how much better the welfare of those committed to our care would be if the physician would assure the corollary. But in the end, as Florence Nightingale reflected, "Now the balance is most happily established. The administration complains of the sisters and the doctors wish the sisters were 'completely under them'. The sisters complain of the administration, and wish that the order 'had it completely under itself'. And all are the best possible friends, and the collision and competition does the greatest possible good. And all work much better for it, and none know how much evil it prevents, how much good it serves."

• CNA Memorial Book Profiles •

Evelyn Hood

(1912 - 1999)

Evelyn Hood's expertise in the labor field was recognized in 1964 with

her appointment to the Canadian Nurses Association Committee on Social and Economic Welfare. In 1966, she began a two-year term as chairperson of the national committee, and she was a leader

in labor relations on both the provincial and national fields until her retirement in June 1970. Previously, she had earned a well-deserved provincial reputation in the labor relations field from the time she was

appointed as director of personnel services for the Registered Nurses Association of B.C. in 1951. The focus of her work was on improvements in salaries and working conditions for nurses.

Evelyn Hood was born May 28, 1912, in Cadomin, a mining town in Alberta. She attended the University of Alberta in a general arts program, thinking of entering law, but switched to the nursing program and graduated in 1936. She worked as a private duty nurse for several years and as a staff nurse at the Vancouver General Hospital. In 1940, she went to the United States where she continued nursing and also completed a diploma program in public health nursing at the University of Washington. She returned to Vancouver in the fall of 1946 and worked as a public health nurse until she joined the staff of RNABC in August 1951. RNABC's labor relations program had begun in 1946, but it was believed that a full-time person was needed. When Miss Hood took over the labor relations work, RNABC was the certified bargaining agent for 1,200 British Columbia nurses.

Although B.C. nurses were at first reluctant to become involved in collective bargaining, once action was taken, they led the way for nurses across Canada. Evelyn Hood, along with Glenna Rowsell, CNA's Labor Relations Consultant, and several Quebec nursing leaders, served as advisors and consultants with other provincial associations.

Evelyn Hood received the first ever Award of Merit presented by the RNABC on May 26, 1972, two years after her retirement. This was in recognition of her stellar contribution to labor relations for the nursing profession in British Columbia and Canada.

Following retirement, Evelyn physically built her own new house. She continued to enjoy golf, gardening, and growing vegetables until a serious accident while crossing the street left her with serious

arm and leg injuries, and she lived quietly after that. She died in December 1999 in Vancouver.

Sources

(See also *Biog File of the B.C. History of Nursing Group in the RNABC Library*)

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Evelyn Hood Biographical File. B.C. History of Nursing Group.

Evelyn Hood [Profile]. (1970, May). RNABC News, p. 30. [From EW]

"Evelyn Hood Receives First Award of Merit." (1972, June/July), RNABC News, p. 5.

"Evelyn E. Hood" [News item]. (1972, July). *The Canadian Nurse*, 68 (6), 43. [Photograph attached, showing her receiving the award of merit]

Evelyn Hood. Interview with Mrs. Helen Gowan by Helen Shore on 2 February 2000. Mrs. Gowan was a long-time friend of Evelyn Hood.

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(Prepared by Helen Shore and Glennis Zilm and submitted to CNA, November 2000.)

Elizabeth G. Breeze

(c1881 - 1938)

Elizabeth Breeze, co-author (with J. Mace Address) of *Health Essentials for Canadian Schools* (Boston/ Toronto: Ginn & Co., c1938), was Vancouver's first school nurse and an extraordinary force in the movement in the early 1900s to educate the public about better health.

A graduate of the Hospital for Sick Children, Toronto, Breeze took post-graduate training at Roosevelt Hospital, New York City, and, later, at University of California. In 1910, when she moved to Vancouver, she was responsible for about 9,800 children in the city's 16 schools. She frequently visited other centres (e.g., Montreal, Toronto, Chicago, Boston, New York) to ensure that school nursing, which was a "specialty" during the 1920s and 1930s, was in the forefront of public health education advances. By 1923, she was supervisor of 10 school nurses in Vancouver. In 1937, she was appointed the first Director of Public Health Nursing of the newly-formed Metropolitan Health Committee of Greater Vancouver; this innovative department was formed from the Vancouver City Health Department and its School Board, plus the health departments and school board from surrounding municipalities. She developed the new nursing program and had a staff of 44 public health nurses, including the supervisors. All nurses were required to have certificate in public health nursing from a recognized university.

She was well known across Canada for her articles on advances in public health nursing (especially on public education through school children). In 1925, she had introduced a course on health for school children at the University of B.C.'s Summer School for Teachers. Her text for high school students, which she completed just before her untimely death at age 57, was part of a popular "Canadian Hygiene Series" and was in use for more than 20



years after her death.

Born in 1881 in Ontario, she moved with her family to Vancouver when she was about 10 years old. Breeze was a graduate of the nursing program at the Hospital for Sick Children, Toronto, and had training in affiliated schools in New York for courses that would not have been offered at the pediatric centre. She did private nursing for a few years before taking on the role as Vancouver's first school nurse. As a leader, she appreciated the importance of the new trend toward university education for nurses, which had been introduced at the University of B.C. in 1919. In 1923, at age 38, she attended the University of California, Berkeley, and was granted a certificate in public health nursing.

Throughout her career, Breeze was active in professional nursing and public health associations. A founding member, in 1912, of the Graduate Nurses Association of B.C. (later the Registered Nurses Association of B.C.), she was almost continuously a member of the executive, serving as president 1921-1923. She also was president of the Public Health Nursing Section of the Canadian National Association of Trained Nurses (later Canadian Nurses Association) and was active on the executive of the B.C. and Canadian Public Health Associations.

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