



News Bulletin

SANATORIUM

The
BOARD

OF MANITOBA

VOLUME 2, ISSUE 1

PUBLISHED BY THE SANATORIUM BOARD OF MANITOBA
For Patients, Staff, and Friends of the Sanatorium Board

JANUARY, 1960

TB Refugees Arrive in Manitoba This Month

Willard Group Conducts Survey At Assiniboine

A three-man survey team, led by Dr. Joseph W. Willard of the Department of National Health and Welfare, paid a visit to Assiniboine Hospital January 12 to make a preliminary study of the hospital's services and personnel.

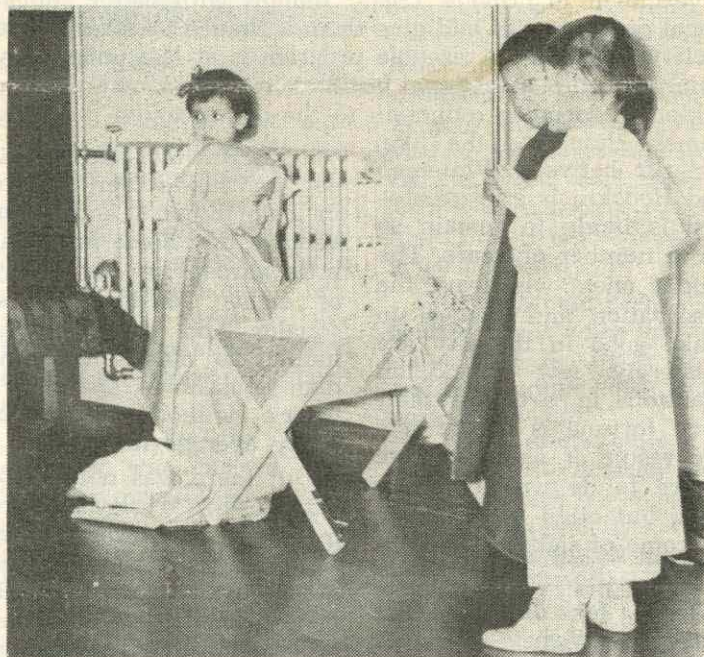
The survey at Assiniboine is part of an over-all study of provincial hospital needs begun last fall by the federal and provincial governments. When completed the findings will serve as a master plan for future hospital construction, determining where new hospitals will be built, by whom, and for how much.

Without this survey provincial authorities fear uncontrolled hospital development in Manitoba, and expect for projects already begun (such as The Manitoba Rehabilitation Hospital) all hospital construction will be postponed until the survey is completed.

The team will advise the government on five points:

- The adequacy of the supply and distribution of hospital beds in Manitoba in meeting present and future needs under the hospital insurance plan.
- Hospital bed requirements of rural areas, towns and cities, and the relative needs for chronic, convalescent and active treatment hospital facilities.
- The relationship of long-term hospital facilities to alternative care facilities.
- The adequacy of educational facilities for training hospital personnel.
- The adequacy of the supply and distribution of hospital personnel.

(Continued on page 4)



A highlight of the Children's Christmas party held at Assiniboine Hospital on December 23 was this colorful Nativity pageant presented by young Eskimo and Indian patients. (Photo by J. P. Prendiville.)

It Was "A Good Christmas" Report SBM Institutions

Another Christmas is over—and the tinsel tree, the roast turkey and cranberry, the soft glow of candles and the carols are all but a pleasant memory. For the Sanatorium Board staff and patients it was a good Christmas while it lasted—a Christmas to remember, as these account testify:

Brandon

Christmas is for the children, and in the SBM institutions even the youngest toddlers got a big thrill helping with preparations.

"For weeks anticipation reigned at Assiniboine as the tiniest fingers folded Christmas colors into decorations for the trees," reports Ted Daigle, "and brown eyes sparkled as balloons took on fantastic shapes."

On Little Christmas Eve it was the children, wheeled snugly in "their little white beds", who led the proces-

sion to an afternoon party. There before a group of representatives from the "Royal Purple" and the Associated Canadian Travelers, they took part in a Nativity pageant.

Games later were interrupted by the arrival of Santa Claus with his bag of toys: guns and holsters for pint-size cowboys, dolls for each little girl.

The origin, meaning and purpose of all Christmas festivities centres, of course, on the Christ Child—and this remembrance escaped none of the SBM hospitals. On the evening of December 23, patients at Assiniboine took part in the story of the Nativity, enacted to the singing of carols.

Other events included a skit by the rehabilitation students, a jig contest (won by William Ross), a square dance exhibition, and a few

(Continued on page 3)

Ten refugee families are expected to arrive in Winnipeg on January 21, the department of citizenship and immigration announced recently.

Earlier the province of Manitoba had promised to take six tubercular refugees and their families but that number has now been raised to 10.

One member of each family has tuberculosis, and these persons will be treated at St. Boniface Sanatorium where they can be close to their families and employment opportunities, Dr. E. L. Ross, medical director of the Sanatorium Board, said. The families will be assured of full support by the federal government until they settle into Canadian life.

Some of the families will leave Vienna aboard a chartered CPA plane on January 20. The aircraft will pick up more refugees at Bonn, then proceed to Canada.

After dropping off the 10 families at Winnipeg, the plane will go on to Regina where another 10 families will get off to take up residence in Saskatchewan.

The acceptance of these tubercular refugees and their families into Canada is part of the government's contribution to World Refugee Year. Waiving its regulations concerning handicapped refugees, the Canadian government announced that it will

accept 100 tuberculous families.

Other Projects

In recent months various committees have been set up in Canadian cities to raise money to adopt and close a number of European refugee camps. The Manitoba Committee has adopted Camp Lohmuehle, which can be cleared and closed for \$140,000.

Some of these camp dwellers, who number 32,000 in all, will be helped to start a new life abroad. The majority, however, will be provided with decent housing and vocational training in their present country of refuge.

Other aims of World Refugee Year are to raise money to support a program of vocational training for Palestine Refugees; to provide the cost of transportation for White Russian refugees in Hong Kong (the survivors, and the children of the survivors of the 1918 Bolshevik Revolution); and, if possible, to clothe, house and feed some of the million destitute Chinese Refugees.

Address all communications to:

THE EDITOR, SBM NEWS BULLETIN,
668 Bannatyne Avenue, Winnipeg, Man.

Authorized as second class mail, Post Office Dept., Ottawa

J. W. Cairns,
Winnipeg, Man.



Profiles

FRANK BOOTHROYD

Frank Boothroyd, chairman of the administration and finance committee, has been an executive member of the Sanatorium Board for seven years, and during that time he has watched with interest the progress made by the Board's four institutions in meeting the expanding health needs of the province. A keen businessman, whose abruptness in speech belies an easy-going personality, he is proud of the Board's accomplishments over the years and looks forward to a new era of rehabilitative medicine.



Born in England, the son of the late Mr. and Mrs. Alfred Boothroyd, Mr. Boothroyd acquired early the businessman's insight for changing nickels into dollars. He came to Winnipeg with his parents at the age of two and attended John M. King and Daniel McIntyre Schools. After breezing through a year in business law at the University of California, he struck out into the business world, working first for the Ford Motor Company of California. In 1933 he returned to Winnipeg to go into business on his own as a service station operator. In the late thirties he branched out into the rent-a-car, taxi, and the bus and trucking fields.

With the outbreak of war, Mr. Boothroyd joined the army and served overseas as a major in the Fourth Division Supply Company and the First Infantry Brigade. Discharged in 1945 he returned to the taxi and rent-a-car business, becoming president of Moore's Taxi Ltd. of Winnipeg and Regina in 1948. He is also president of Grosvenor Taxi Ltd., and vice-president of Yellow and Northern Taxis and Hertz Rent-a-Car; serves as chief agent for the Northern Union Insurance Company and as vice-president of American Taxicab Association in Chicago.

Mr. Boothroyd is married and has one son, Ralph, now living in Edmonton. Fishing and bowling are his favorite recreations—and occasionally he likes a good game of golf. Keenly interested in civic affairs, he is a member of the Winnipeg Chamber of Commerce and the Canukeena Club, and is a Divan member of the Shriners.

W. J. ANDERSON

Ever since its discovery more than a half century ago the chest X-ray has remained the most important tool in the diagnosis of tuberculosis. With the introduction of the national Christmas Seal campaign in the late twenties mass X-ray surveys were started in Manitoba as the first concerted effort to control this infectious disease. These were pioneering days in tuberculosis prevention — but even then the few men and women who embarked on the new venture had set their sights on ultimate eradication. One of the men who can give a first-hand account of these earlier times is Walter J. Anderson, senior radiographer with the Sanatorium Board's surveys and travelling clinics.



Wally was born in Winnipeg, the son of Johann and Steinunn Anderson. While still a boy he lost both his parents to tuberculosis, and he had hardly begun his education at Wellington and John M. King schools when he too fell victim to the disease. He was admitted to Manitoba Sanatorium in 1925 and after three years of "chasing the cure" was pronounced well enough to work in the sanatorium's X-ray department. In 1930 he joined the Board's first travelling clinics. "Those were the happy days," Wally recalls. "We were really pioneering, and though we worked long hours and under hectic conditions, we were proud to be among the first people to take the X-ray machine to the people." Working with three doctors and two public health nurses, Wally travelled all over the province. He was with the first clinic to reach Flin Flon, The Pas and Sheridan in the northern areas, and each year he proudly kept notes on their progress. "From two clinics in 1926 I watched the Board gradually reach a peak of 10,000 clinics in 1939," he says. "And I watched a death rate of 64.7 per 100,000 population in 1930 slowly decline to 40 per 100,000 a decade later."

In the meantime Wally, too, had been making progress. While in sanatorium he finished his high school education

An Accident Changed His Life



Wesley Hart learns auto body repair.

For many years various Canadians have pressed the government to provide Treaty Indians with better educational opportunities and give them a chance to enter White society. Although a sizeable program is at last under way to improve the educational facilities for Indians and provide a kind of social introduction to the city through boarding homes, clubs and the like, the rift between Whiteman and Redskin is still great—and is likely to remain so for a number of years. The "lucky ones" who leave the reservation and manage to make good in the city are relatively few — and in Manitoba, in particular, their good fortune is not always the result of an aggressive desire to do well on their own, but often the peculiar outcome of sickness or accident.

Take, for example, the story of Wesley Hart. A stocky Cree with a clean-cut, pleasant face and a shock of unruly, black hair, Wesley grew up on the Fisher River Reserve, about 140 miles north of Winnipeg. His father, although crippled, is a skilled painter in Koostak, a small settlement on the

and in 1930 received his Registered Technician's certificate. He became a senior radiographer at Manitoba Sanatorium in 1932 and by May, 1946, was head of the X-ray department. He came to Winnipeg a year later to take charge of the Board's X-ray supplies and film equipment.

Married in 1935 to the former Jonina Johannesson, also an ex-patient at Ninette, Wally has one daughter, Valdyn, 18, who plans to become a nurse. He lives in a cosy, white frame house on Simcoe street, and in his spare time likes to relax with a book or newspaper, work in his garden, or just sit back and reminisce about earlier days at Manitoba Sanatorium . . . of the good times he had there taking part in the staff fun and skits . . . and of the hard, but happy times when he, too, was a pioneer.

south shore of Lake Winnipeg; and his mother, literate in both English and Cree, keeps a tidy home and neat little garden for her family of eight. Considering the squalor and poverty that haunts so many other Indian households, the Hart's were without doubt an above average family.

But there was nothing to suggest that Wesley's future might be considerably brighter than that of the other boys. To earn a livelihood in the city seems a far-off dream to most Indians. Confined to the reserve they have little hope of learning a trade. Off the reserve they would have no chance without some sort of trade or skill. To learn a trade takes money and education — two things that are not the luxuries of most adult Treaty Indians.

So, like the other Indian boys, Wesley went to school and managed to work his way up to Grade 7. At 14 he quit and went to work. He decided to try fishing and for a while worked out of camps on Lake Winnipeg and later, Great Slave Lake. Then he switched to logging on the inland lakes 40 or 50 miles north of Fisher River.

Wesley might have remained a logger or fisherman for the rest of his life had it not been for an accident in March, 1957. He slipped and broke his leg and after six months in hospital was told he would never be able to do heavy work again. It was then that the Indian agent at Hodgson suggested he enroll in the newly opened Indian Rehabilitation Unit at Assiniboine Hospital, Brandon.

The primary aim of Assini-

Who . . . You?

The way you look on life increases your chances for happiness, health and success. Why not make these resolutions for 1960:

Take pride in your work. When you take pride in your work, no matter what kind of work you do, it leads to a top-notch quality job.

Be friendly. General George C. Marshall stressed these points on friendliness.

1. Listen to the other fellow's story. 2. Don't get mad. 3. Let the other fellow tell his story first. Those who followed this advice got things done without friction.

Be Helpful. A philosopher said, "One always receiving never giving, is like a stagnant pool in which whatever flows remains, whatever remains corrupt." Helpfulness is giving.

Be tactful. Bert Estabrook wrote: "He who has learned to disagree without being disagreeable has discovered the most valuable secret of a diplomat."

Be hopeful. For if you lose hope you have lost everything. Hope and work. Work and hope. "Have you ever known a man," said Thoreau, "who did not work steadily with his eye on success and not achieve it in some degree?"

Assiniboine's rehabilitation unit is the integration of physically handicapped young Indians. Under the direction of Miss Ruth Snuggs, unit supervisor, Wesley learned all the nice little amenities of urban life: how to dress properly, spend money and, in general, conduct himself in a socially acceptable manner. He also brought his academic standing up to the Grade 8 level, and with the assistance of Indian Rehabilitation Officer Ted Locke, mulled over job possibilities.

After three months at the unit Wesley decided to enter a course in auto body repair at Manitoba Technical Institute. He was duly enrolled in May of last year and graduated last December. The day after graduation he had a job with Modern Auto Body Repair in Selkirk.

Happy and content now, Wesley probably doesn't realize the full implication of this new trend to help Indian find his place in a changing order; but his new job and his new way of life he really appreciates. Says he in the cryptic Indian fashion: "It's about the best thing that ever happened to me."

Dr. D. F. McRae, Physician and Scholar, Dies at CTC

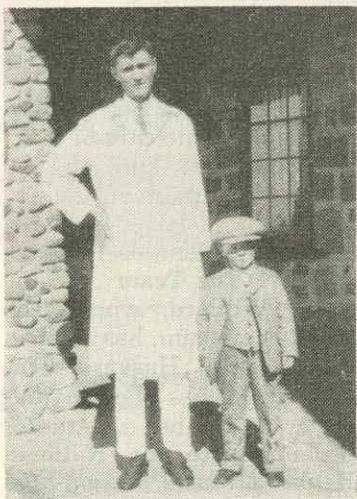
Dr. Duncan Farquhar McRae, 73, a former member of the Sanatorium Board medical staff and for some years a patient at Manitoba Sanatorium and Fort San., Sask., died December 14 at the Central Tuberculosis Clinic. A man keenly devoted to tuberculosis prevention and treatment highly regarded by all who knew him, his death is a grievous loss to the Sanatorium Board.

Dr. McRae was born in Carlyle, Sask., on December 23, 1886, the son of Scottish pioneer farmers. He put himself through Manitoba Medical College but had hardly begun to practise his profession in 1916 when he became ill with tuberculosis. From then on his life was a continuous cycle of illness and recovery. When he was well he was employed as a Board physician; during his illnesses he was an invaluable adviser and friend.

During the 1920's Dr. McRae opened a private practice in Winnipeg but after a short time was forced by illness to retire. Later in that same decade he was one of the first physicians to serve on the Board's Travelling TB Clinics and while at Ninette in the early thirties acted as an assistant to the late Dr. D. A. Stewart.

From 1937 to 1948 he served as an assistant to the medical superintendents of the Central Tuberculosis Clinic, Dynevor Indian Hospital and Clearwater Lake Hospital. In 1948 he again joined the Board's Travelling Clinic and Survey program and for some years read all the X-ray survey film at the CTC. He retired in 1957.

Although a frail man physically, Dr. McRae had a tremendous capacity and love for work. He was a stubborn idealist, interested in everyone and everything. He was an omnivorous reader (who thought nothing of ploughing through the dictionary), a prolific letter-



Dr. D. F. McRae in earlier days.

writer, a meticulous man with many hobbies. He carried on innumerable chess games by mail, loved to play bridge and work out difficult crossword puzzles. He had a profound knowledge of botany and was never happier than when roaming rugged land in search of rare specimens.

His love for the extraordinary was carried over into his medical work, and in his diagnosis this "real student of medicine" always looked for the unusual.

Besides publishing a few medical articles, Dr. McRae used to contribute regularly to the old Messenger of Health, and whether giving advice to nurses, devising a new puzzle for readers, or telling other patients "how to live happily and helpfully" his writing, just as his speech, was stimulating as it was poetic. Perhaps it is in these letters that the personality of this outstanding man best emerges.

Dr. McRae was a kindly physician and in a 1939 letter to Dr. John Orr of Fort

San he wrote of treatment practices at Manitoba Sanatorium 22 years before:

"You will well remember how we were taught and preached to and practiced Tuberculosis Treatment in those days. There was no X-ray, no pneumothorax, no lamp treatment, no surgical measures of which there is so varied a choice today. Morning and evening we walked the wards of both the infirmary and pavilions and gave largely to our sympathy, when there was so little else worth while we had to give. We wrote voluminous histories in the ingenuous faith that patients told us truly the intimate story of their lives. Labouredly an dwith infinite distress to the patient we percussed and auscultated his chest — all of which may have added to our knowledge but availed him little. We gave medicines with an open hand for every conceivable symptom the patient could think up, for if it did nothing to cure him it was a means of sustaining hope in fainting hearts . . ."

He was a man greatly dedicated to his work and that same year he wrote these words of admonition to the sanatorium staff:

" . . . The critical sense of the patient of 1939 is infinitely greater than that of his forerunner of 1909 or even of 1929, for he rightly counts himself an active partner in the health program of the nation. Let us not lag behind within the walls of the sanatorium lest we suffer the humiliation of deserving criticism from those whom we profess to lead and teach.

"It is necessary that we who are of the sanatorium, physicians, nurses, technicians, helpers, and patients too, should consult together and examine our mental equipment and integrity so that we may detect any weakness in our armour. Are we putting over and practicing in our daily round on the job those principles which lie embodied in the slogan, "fresh air, good food and rest"? Is our

observance of rules of routine and rest, of personal hygiene and habits, and above all, of that exquisite daintiness and elegance of person and conduct which we call 'technique', such as to merit the approval of our keenest critic? Are we doing the best that lies in us?"

The doctor always managed to put his time to good use and even while lying in bed he read X-ray plates for the Board and kept his books and typewriter beside him. In 1940 he wrote an article to the patients urging them to use their time in sanatorium furthering their knowledge and education.

"The days before tuberculosis struck us down were so filled with the little inconsequential things of the moment that we never got beyond them — never took time to analyse our ideas or our ambitions and whither they were leading us. Now when circumstances force us to take time we use it in futile regret and resentment and worry, or what is perhaps still worse, waste it in bestial indifference and lethargy of mind. How much more creditable is that spirit which drove Ulysses from the warmth and comfort of his fireside "to follow knowledge like a sinking star"!

"A cultivation of the amenities and of human relationships in general is something that has unlimited scope within a sanatorium, so that even those patients whom circumstances or lack of desire bar from other study should avail themselves of this most essential of all educational refinements . . . the knowledge of how to live happily and helpfully among all sorts and conditions of people. It is not in length of days but in fulness of achievement that we attain the perfect life."

Dr. McRae is survived by a brother, Dr. D. C. McRae of Kelowna, B.C. He was buried in his native Carlyle, Sask.

Christmas

(Continued from page 1)
bouncy selections by 85-year-old fiddler, G. Bone.

Ninette

Christmas is the time of the great feast — and on Christmas evening at Manitoba Sanatorium an overflow crowd of 239 sat own to a sumptuous turkey dinner.

The dinner climaxed an exciting day which began with carol singing around the Christmas trees and a visit from old St. Nick, his wife and fairies.

Highlights of the Christmas concert on December 29 included a Nativity pageant performed by Indian patients with the nursing staff forming the choir; a Christmas drill an song by 10 Indian boys; accordion duet by Tony Hosak and Miss Edna Hargreaves; vocal duets by Mrs. Martha Dezeevw and Miss Gladys Wheatley, Isabel Cook and Marcella Kipling; a pantomime by Mrs. Aileen Pritchard and Mrs. Isabel Axworthy; a piano selection by Miss Velma Mason; and a tap dance by Linda Booth. Afterwards the staff took part in a skit "spoofing" in traditional manner prominent members of the staff.

Clearwater

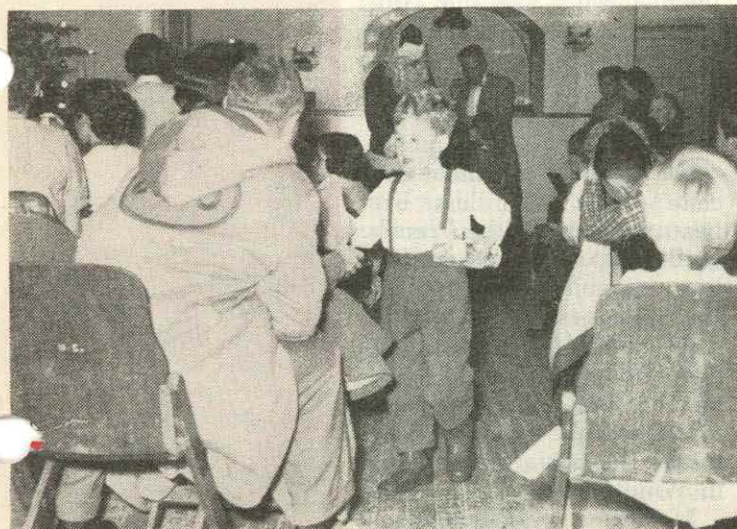
To the children the most exciting thing about Christmas is the visit of that be-whiskered gentleman with his wonderful bag of toys and goodies. On December 20 this grand old man (played by Tom Lamb of The Pas Elks Club,) accompanied by 30 other club members, paid a visit to Clearwater Lake hospital and distributed gifts and candy to each patient.

Santa Claus, this time portrayed by Dr. P. Seifer, returned on Christmas Day to distribute more gifts, donated by many organizations through the efforts of the Flin Flon radio station.

Winnipeg

All work stopped at the Central Tuberculosis at noon December 24 when the staff assembled in the admitting room for a turkey buffet. Fred Day, former accountant at the Board, returned to play his annual role as Santa Claus. Dressed in a surgical gown and cotton batting headgear, he distributed comic gifts.

T. A. J. Cunnings, setting aside his usual decorum as executive director, sat down at the piano and rattled off Jingle Bells. The staff then wished each other a "Merry Christmas" — and repaired home to enjoy just that.



(Photos by Erken Hentschel and J. P. Prendiville.)

CHRISTMAS FESTIVITIES — (Left) Santa Clause put in several appearances during festivities at Clearwater Lake Hospital, The Pas. Here a young lad proudly displays a gift he received from the "grand old man" at a Christmas party held by the Ladies' Club for the child-

ren of Staff members. (Right) Numerous staff parties were held at all the SBM institutions during the holidays. A joyous round of carol singing preceded a Christmas dance and luncheon held for Assiniboine Hospital staff members at Sokol Hall in Brandon, December 16.

Old Ruins and Monuments Are Okay But Place-Names Are As Interesting

There is an old saying that a land without ruins is a land without memories; that a land without memories is without history. As the old gateway to the Northwest Manitoba is a province rich in memories — but, contrary to the old maxim, the romance of our history is not so much preserved in magnificent monuments and ruins as in the quaint and descriptive names of our rives, lakes and towns.

The native Indian period is recalled by many place-names in Manitoba. Indeed the Indians have given us the name of our province—a combination of *Manito* and *Obaw* meaning “the narrows of the spirit” and *Obabika* meaning “the narrows between rocks”. The oldest native name is that of Lake Winipeg which was supposedly known to the white man before he had even seen it. Lac Winipic, as it is so quaintly referred to by our early explorers, means “nasty water lake” in Indian, and the people who lived on its shores were known as the *Ounipigon* or “dirty people”.

In 1612, while Will Shakespeare was still bringing down the theatre houses of old London, Admiral Sir Thomas Button, with a royal letter in his pocket to the Emperor of Japan, made his way into the lonely waters of Hudson Bay. Spotting no emperors about — indeed, probably no people at all — he firmly planted the British flag in Manitoba soil and sailed off home with a crew of three. (He lost the rest to scurvy and the weather.) Before he left he named the river which emptied into Hudson Bay at the point where he landed, the Nelson River . . . after his dead sailing master Francis Nelson.

With the formation of the Company of Adventurers of England (The Hudson's Bay Company) in 1670, a multitude of trappers, factors and other administrators descended on the northern lands and soon the names Hayes River, York Factory and Churchill River sprang into existence. Most of these were named after the company's beneficent governors and charter members who stayed behind in England.

But as the British traders penetrated deeper and deeper into the territory more poetic names appeared: Split Lake, Playgreen Lake, Red River, Burntwood River and Swan River were all named by these tough adventurers. Subsequent names, also due to the fur traders, are Brandon and Fort Garry (originally Fort Gibraltar, now Winnipeg).

Brandon, or Brandon House as it was then known, had three sites on the Assiniboine River before it settled down to become a city, and it is named after the 8th Duke of Hamilton who in 1782 took his seat in the House of Lords as the Duke of Brandon, Suffolk, England.

In the 1730's the undaunted La Verendrye and his sons came west, leaving behind them a string of forts from Rainy River to The Pas. On the Red River near Lake Winnipeg they built Fort Maurepas, which they named after a French count; and on the Assiniboine near Portage la Prairie they built Fort La Reine in honor of their queen. Fort Rouge, so named because it had a red door, sprang into being at the junction of both the rivers.

Up the Saskatchewan River, near the present site of The Pas, La Verendrye's sons built Fort Paskoyac. In the early nineteenth century The Pas appears on the map, and from there on begins a hassleover the origin of this word. The site is the natural crossing point of the Saskatchewan River and some contend that the name comes from the abbreviation of the Cree words, *opasquaow*, meaning “narrows between wooded banks.” Others argue that Pas is the French noun meaning “gap” or “crossing,” as in Le Pas de Calais, which in case you don't know is the French name for the Dover Strait.

The town of Selkirk recalls the Hudson's Bay Company's cession of land along the Red and Assiniboine Rivers to Thomas Douglas, Earl of Selkirk. While all of Europe rocked to Napoleon's guns, this “most remarkable man in the annals of Canadian immigration” went busily about his business, planting settlements along these rivers.

In 1812 Selkirk procured a band of soldiers of the De Meuron (Swiss) Regiment to protect his colony against the renegade Nor'Westers. But he soon saw that more than the military was needed to protect the colony and control the half-breeds, most of whom were by profession Roman Catholic. He offered the Bishop of Quebec a block of land on the

east side of the Red River if he would send out missionaries to tame the half-breeds and French-Canadian settlers.

In July, 1818, the Revs. Joseph Norbert Provencher and Severe Joseph Nicholas Dumoulin arrived and were given a rousing welcome by the unruly half-breeds. A chapel was opened that same year and placed under the patronage of St. Boniface, the apostle of Germany, in hopes that he would “draw God's blessings on the none too fervent Meurons.” By extension the name was applied to the whole Catholic settlement.

Despite innumerable hardships — i.e. grasshopper plagues, ordinary plagues, loss of stock — the little colonies managed to flourish — the Catholic French debeloping one side of the River, the Protestant British the other.

During the latter part of the last century new waves of settlers came. The settlement names given by the Icelandic people who first arrived in 1875 are commemorative of places in their native lands and of their traditions. The chief village of New Iceland, Gimli, is named after the residents of Odin, father of gods and men. All good and brave men go to Gimli after death and stay there with Father Odin.

Similarly, the name, Bifrost, is taken from Norse mythology and means the rainbow that every warrior had to cross from this life to the next. Only those who met their death by arms in war had the privilege of walking “bifrost.”

Many of the place-names given by Mennonite settlers, who were brought to this country under a government plan, are mostly repeats of similar villages in Russia and Germany. Steinbach, for example, was settled from Steinbach, Russia, and the name means “stony brook.”

The majority of later settlers, however, came to Manitoba on their own steam. Usually they made their way up from the international border to Winnipeg. Their successors, following old trails and new, then found settlements in the outlying parts.

It would take too long to list these settlements or to tell the stories behind the place-names. One little village we can't forget, however, is Ninette, which was named in 1884. Apparently the settlers had some diffi-

Willard Survey

(Continued from page 1)

During the surveys hospitals visited can present reports on their problems relating to hospital facilities and personnel, and make suggestions for a solution. It is the intention of the Sanatorium Board to give a full account of its present program for the care of long-stay patients, and on the future operation of the rehabilitation hospital and physical medicine services.

The Team

Dr. Willard, who heads the survey team, has a Ph.D. degree from Harvard University. He has been involved in a number of studies pertaining to the National Health Grant Program and the Hospital Insurance Program; has served as government adviser to the International Labour Conference; and has been consultant to the World Health Organization in surveys of public health services in Jamaica and Costa Rica.

He is assisted by Dr. J. D. Adamson, medical consultant to the Manitoba Hospital Services Plan and chairman of the Advisory Commission established under the Hospital Services Act; and J. A. McNab, administrator of Port Arthur General Hospital, who will act as consultant on hospital aspects of the survey.

Dr. Adamson, formerly a professor of medicine at the University of Manitoba, was for some time consultant to the Department of Health and Welfare and to the Society for Crippled Children and Adults. He is a life member of the College of Physicians and Surgeons of Manitoba, and is currently chairman of the Sanatorium Board's Medical Advisory Committee.

culty deciding on a suitable name for this pretty little town, and it is said that Ninette, a contraction of Antoinette, was the heroine of a best-selling French novel. (Or, as some may like to believe, it could be the namesake of the “let-them-eat-cake” lady who lost her beautiful head to the French guillotine.) But others, no less imaginative, say that this place-name was the suggestion of a French-Canadian wayfarer whom the village delegates just happened to meet while on their way to see the postal authorities in Winnipeg.

Memories, history . . . Manitoba indeed has it all, if one cares to look into the romantic story that lies behind the names of each little town — and river and lake.

Bulletin Board

The Alumnae Association of the School of Nursing Education, University of Manitoba, held a reception at the YWCA January 6 in honor of Miss Isabel Maitland Stewart, professor emeritus of Columbia University, New York.

Miss Stewart, 82, is the sister of the late Dr. D. A. Stewart, founder of Manitoba Sanatorium. A resident of New York City, she is the author of several books on nursing and was one of the first members of the International Council of Nurses established at the turn of the century. She was formerly professor of Nursing Education and Director of the Division of Nursing Education at Columbia University Teachers' College.

At a meeting of the Medical Records Committee of the Sanatorium Board of Manitoba, Dr. S. L. Carey, medical superintendent of Clearwater Lake Hospital, was elected chairman. He succeeds Dr. Gordon Coghlin, assistant medical Superintendent of Assiniboine Hospital, who was recently elected chairman of the Board's newly formed Pharmacy Committee.

New additions to the Sanatorium Board nursing staff include: Mrs. Margaret Stephenson of Belmont, general staff nurse at Manitoba Sanatorium; Miss Kathleen Mary Blaine of Brandon, general staff nurse at Assiniboine Hospital; Mrs. Edith Amos of Ninette, LPN at Manitoba Sanatorium.

Miss Vivian Olynyk, Winnipeg, was appointed secretary to the business manager at Clearwater Lake Hospital.

Dr. David Stewart, son of the late Dr. D. A. Stewart, left his post this month as professor of obstetrics at University College of the West Indies, Kingston, Jamaica, for an extended tour of Africa. Dr. Stewart, who will be accompanied by his wife Ruth, will make a study of obstetrical and gynaecological practices in various African countries with the help of a grant from the Carnegie Foundation.