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THE DOCTOR'S OFFICE, WALLS AND NORTH-WEST BASTION AT
LOWER FORT GARRY

by

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THE DOCTOR'S OFFICE, THE WALLS,

AND THE NORTH-WEST BASTION:

LOWER FORT GARRY.

The History of their Structures and Functions.

by

Philip Goldring

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Grateful acknowledgement is made to the Hudson's Bay Company for references to their Archives in London, and to the Manitoba Provincial Asylum at Selkirk, where I examined the early medical records. I am also indebted to Professor Cyril Greenland for his assistance in providing material on the history of psychiatric treatment in Canada.

P.G.

I: THE DOCTOR'S OFFICE

The doctor's office is the newest original structure still standing within the walls of Lower Fort Garry. It was built in 1885 as an office for Dr. David Young, first medical superintendent of the Manitoba Asylum when that institution was founded in the north-east corner of the Fort. As such, the structure is divorced from the main interpretive themes of this National Historic Park, namely the economic activities of the Lower Settlement, and the supplying, provisioning and administration of the fur trade of the Northern Department. The doctor's office belongs, rather, to the fifteen-year period of government activity, 1870-1885.

No record has been traced of the actual construction of this building. No such structure existed in December, 1884: a plan prepared by the Hudson's Bay Company at the time the asylum grounds were leased to the government shows a small warehouse just west of the north gate-way. The present doctor's office was erected immediately to the east of that warehouse, which was then presumably demolished.¹ Dr. Young's son, Colonel Hunter Young of Selkirk (now deceased) recalled for J.E. Wilkins in 1956 that his father had never actually lived in the office, and that it was simply his dispensary.² It must also have been the administrative centre for the entire asylum complex.

¹ See J. Wrigley to F.W. Holloway, 24.12.84, HBCA B.303/c/1, with enclosed plan of the Fort.

² J.E. Wilkins, Lower Fort Garry Inspection Report (NHSS Report No. 246) pp. 8-9.

The patients were removed from the Lower Fort in May, 1886, and presumably the doctor's office ceased to function as such at the same time. In 1906 the Hudson's Bay Company converted it into a laundry, which it remained during the tenure of the Motor Country Club.³ By the time Wilkins visited the Fort in 1956, the doctor's office had been converted to its present function as an office for the commissionaires of the Fort. Wilkins commented that the building was particularly well-suited to its function, since it commanded a view of all three entrances to the Fort, and was beside the busiest of the three gates. He added that if it had not been so suitable for its current use he would have proposed its demolition.⁴

The doctor's office itself is a frame structure, but whether this is Red River Frame or more modern design has not been determined; nor is there any conclusive evidence to show whether it has always been covered with clap-boards, as it is now.

The structure measures approximately 18'4" x 14'4", exterior measurements, according to the appended sketches which presumably were prepared by Wilkins. (See pp. 4-7, below). The structure is about 8' in height from the cills to the eaves, but the total height from the cills to the peak of the gabled roof is 17'. The brick chimney is about 14' high; it is mounted on a bracket about 6' above the cill. There are three windows, each about 6'x 3', with four panes 12" x 30". One of these windows is centred in the rear or north wall; the other two flank the door on the south side.

³ Lower Fort Garry Inventory of Buildings, 1906, HECA B.303/d/286, and Robert Watson, Lower Fort Garry (Winnipeg, 1928) p. 53.

⁴ Wilkins, loc. cit.

No evidence has been found concerning the interior furnishings of this building at the time when it was used by Young; at the turn of the century however, it was definitely still heated by a wood stove and lighted by coal-oil lamps.⁵

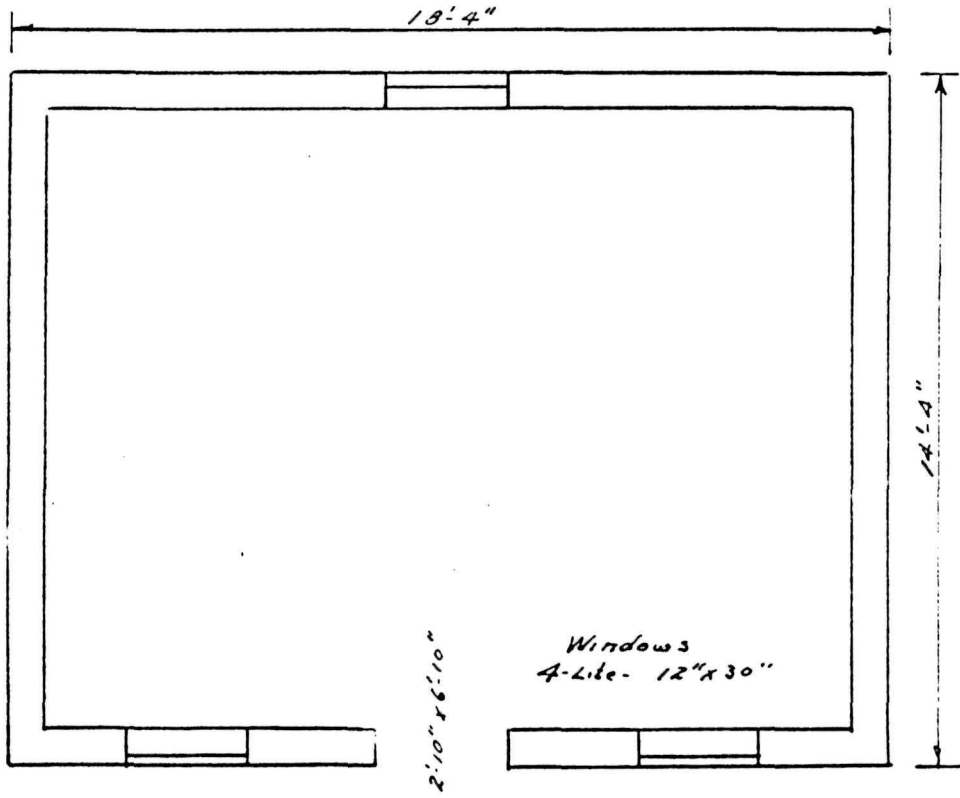
Specific information on the use of this building during Young's occupancy appears to be totally lacking. It is proper to assume, however, that it contained his medicines, other professional instruments, the medical records of individual patients⁶ and other business papers, including his journal, the original of which is, I believe, in the custody of the Park Superintendent at Lower Fort Garry. Interpretation of this building will have to be based on what is generally known about all three buildings of the asylum compound, as described in NHSS Report No. 544, pp. 48 to 61. Those pages are therefore incorporated into the present paper as pp. 8 to 22.

⁵ Lower Fort Garry Inventory of Buildings, 1906, loc. cit.

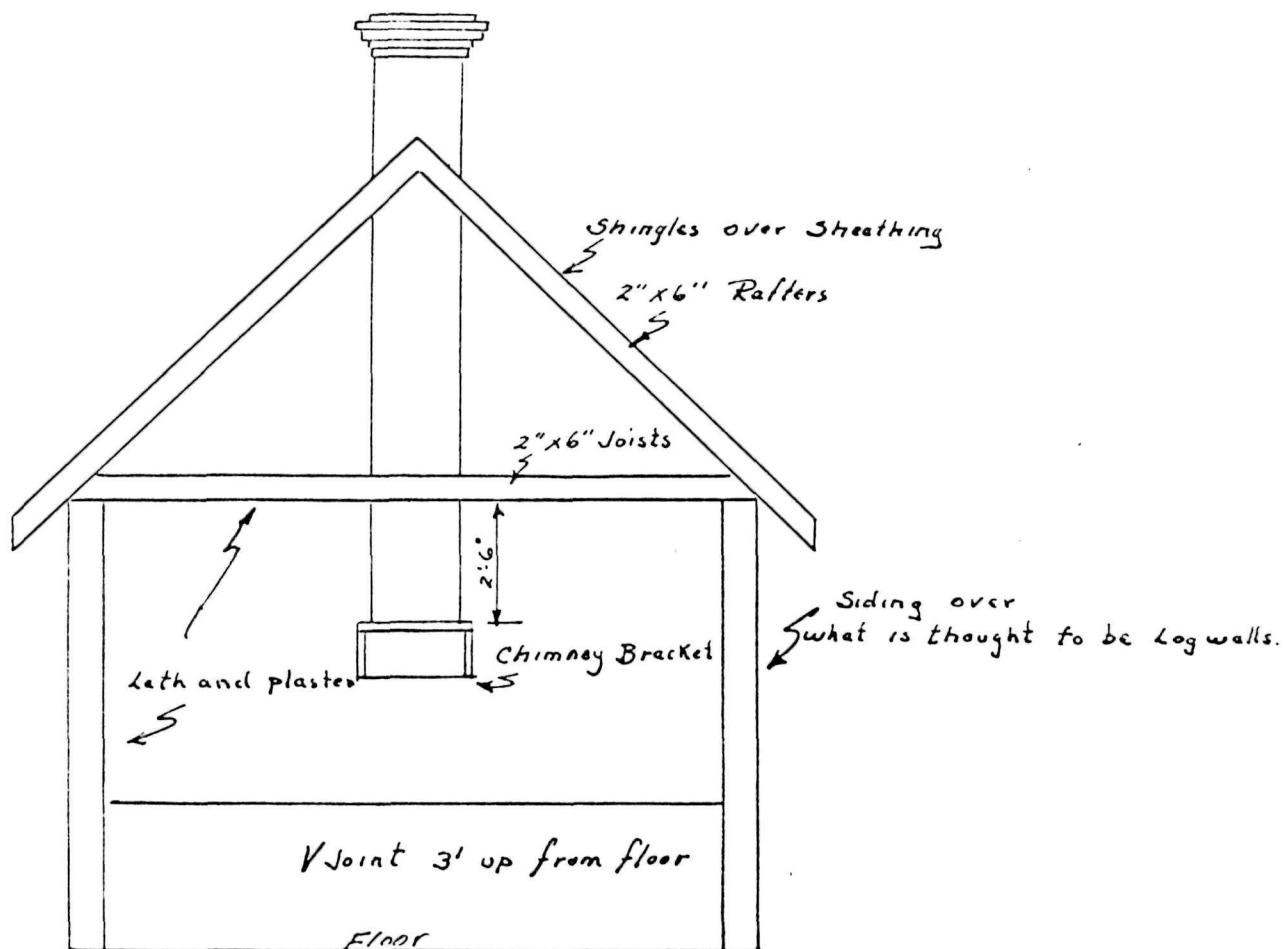
⁶ I examined these records at the present Selkirk Asylum, where they are kept in letter-size buff-colored file folders. These folders, however, do not appear to be the originals. About 45 of the files relate to the period 1885-1886. The records include in most cases certificates of committal, progress reports on patients, correspondence from relatives or friends of the patients, and in some cases, out-going letters written by the patients but not forwarded by Dr. Young to the intended recipients. Some of the latter are unintelligible.



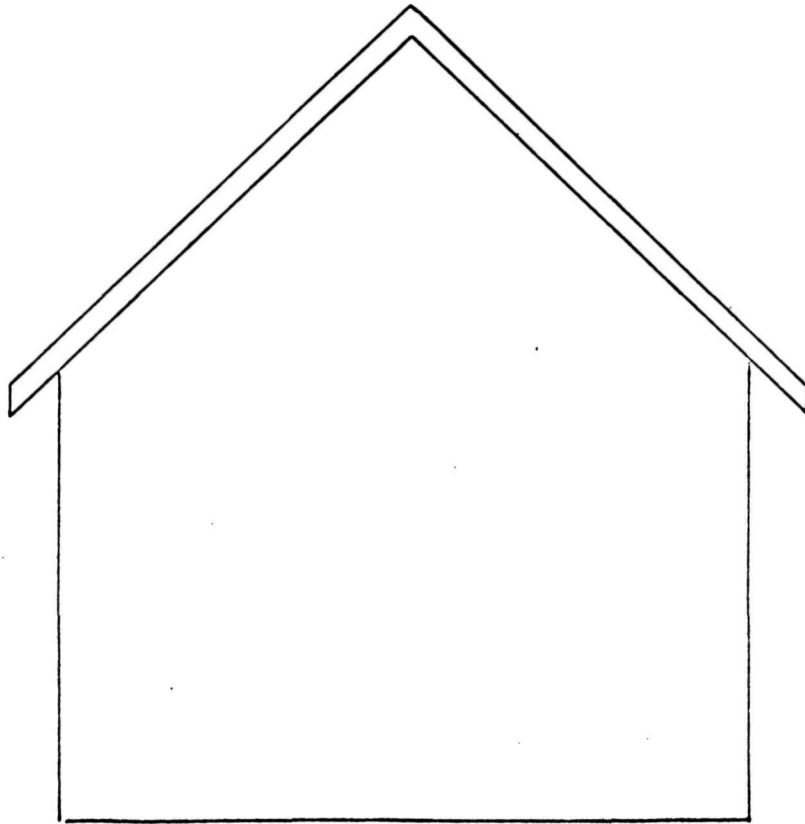
SOUTH ELEVATION



FLOOR PLAN



SECTION VIEW



END VIEW

II: THE ASYLUM, 1884 to 1886

1) Founding and Administration:

Warden Bedson of Stony Mountain Penitentiary had protests for years against the confinement of lunatics in prisons. He argued, quite rightly, that their condition warranted an entirely different treatment from that accorded ordinary convicts. He also noted the bad effect of this practice on the prisoners themselves.¹ In 1875, the provincial government and legislature proposed that "owing to the limited income of the Province it is impossible to erect and maintain an Asylum for insane persons at the public cost.", and it invited "the Privy Council of Canada to set aside a portion of the Penitentiary now being erected in that province for the reception of Criminal lunatics, and other insane persons, the reasonable cost of maintaining such last persons to be borne by the Province."² Justice Minister Blake recognized this quickly as part of the continuing game of dominion-provincial financial bickering, and in particular as one of Manitoba's efforts to have public institutions erected and supported by Federal funds. He also pointed out how similar the proposed arrangement was to the existing relationship between the federal and Ontario governments concerning Rockwood Asylum, an arrangement which was "deemed by both the Canadian and Provincial Government unsound in principle and unsatisfactory in practice." The province's request was not only turned down cold, but was met with an ultimatum: all lunatics were to be removed from the federal penitentiary at Lower Fort Garry before April 1, 1876, "provided no contingency should occur rendering earlier action necessary."³

¹ See N.H.S.S. Report No. 544, p. 44.

² Cabinet Report signed by Mackenzie and Dufferin, 22.12.75; PAC: RG 2 - 1 - Vol. 117 (Privy Council Papers).

³ Ibid.

Blake's deadline, April 1st, for removing the insane from the federal penitentiary at Lower Fort Garry was simply ignored. The lunatics remained in federal prisons not only while the penitentiary was at Lower Fort Garry but for eight years at Stony Mountain as well. At long last the Province took action: in January, 1884, surveyors began to lay out a site for the new Provincial Asylum at Selkirk.⁴ Sir Hector Langevin laid the cornerstone on August 26th, but it was obvious by this time that completion of the institution would be long delayed.⁵ The federal authorities were increasingly impatient to clear out the lunatics, as demands for extra space at Stony Mountain became more and more pressing.⁶ So the Province decided in October, 1884 to move the lunatics into Lower Fort Garry until the Selkirk Asylum was ready to receive them. After a late start⁷ the provisional asylum neared completion, supervised by Mr. R. Dickson, by the end of January, 1885.⁸ The province's lease with the HBC was dated 22 December, 1884; the institution was formally opened February 18th and began to function on the 20th,⁹ and remained at the Lower Fort until May of 1886.¹⁰

Like the penitentiary which had previously occupied the same principal building, the asylum was a pioneer institution in the Province, located at the Stone Fort as a stop-gap measure only. It is unlikely that the medical superintendent, the only doctor attached to the institution, had any special training in psychiatric practice — hardly an unusual deficiency in 1885. This medical superintendent was Dr. David Young, previously referred to as the medical officer of the provincial penitentiary. Young was born in Sarnia, Canada West in 1847, and received his M.D. from Queen's University

⁴ Selkirk Herald, 18.1.84 3/a.

⁵ Ibid., 29.8.84 2/c.

⁶ CSP 65/1881; CSP 12/1882.

⁷ Selkirk Herald, 1.11.84 3/d.

⁸ Ibid., 31.1.85, 3/d.

⁹ February 18th was the date of a proclamation by the Lieutenant-Governor; the actual date of occupancy is taken from Dr. Young's Journal (hereafter referred to as YJ), entry for 20.2.85.

¹⁰ Departure date taken from Manitoba, Pictorial and Biographical, loc. cit.

in 1871. In June of that year he began his medical practice at Lower Fort Garry, becoming immediately medical officer at the penitentiary. He supervised the transfer of the insane from Stony Mountain to Lower Fort Garry in 1885, when he became medical superintendent of the Manitoba Asylum, a post which he held until 1912. His career was not without controversy; his troubles with Warden Bedson have been noted above, and a more serious charge was levelled against him in 1885. John Gunn, a prominent resident of St. Andrew's parish complained of Young's appointment to Sentator Schultz, who replied that "of course,, Lunatics in their asylum are purely matters of Provincial care and if Young has the charge in this way I can do nothing but if the Dominion still controls I can & will object to their being in charge of such a drunken incompetent."¹¹ There seems no other evidence of this charge; Young's journal and the length of his service both suggest that one should consider the source of Schultz's remark, and ignore it.

Though Young himself had virtually no formal experience with lunatics, he had one experienced staff member: Miss McBride, the matron, had occupied a similar position in the asylum at London, Ontario. The matron's assistant, chief attendant, and bursar were probably all local people or recent settlers -- they were Miss Carrie Kennedy, George Black, and James Colcleugh respectively.¹² Young always had difficulties in retaining staff -- no doubt because of the nature of the institution. Carrie Kennedy resigned in June, 1885, having served less than six months, "her relations objecting to her remaining any longer."¹³ Young

¹¹ Schultz to Gunn, 23.2.85, PAM: Gunn Papers.

¹² Selkirk Herald, 21.2.85 2/d.

¹³ YJ, 13.5.85.

even had trouble retaining washerwomen; they struck," said the work was too hard and the pay too small", in April, 1885.¹⁴ There was also a considerable turnover in male attendants, even in the brief year spent at Lower Fort Garry.

There was a good deal of diversity both in the type of lunatics committed and in the manner of their treatment. All, however, were committed in the same way. The allegedly insane person was brought before a Justice of the Peace or before a Police Court, where appropriate testimony concerning his state of mind would be given by friends, neighbours, witnesses to apparently insane acts, or by the patient himself. Then the patient would be interviewed independently by two doctors. If they reported in favour of committal to the asylum, a warrant was issued over the Lieutenant-Governor's signature, and the patient was taken to Dr. Young. Discharge procedures were less exacting; in fact on at least one occasion an inmate of the asylum discharged himself. Young remarked in his dairy, "As I wanted his wife to take him home & he is quite fit to return [I] made no effort to find him."¹⁵ Patients returning home or being otherwise discharged without the superintendent's full assurance that they were cured were usually released into the custody of a friend or relative. The custodian had to send Young fortnightly reports on the mental and physical health of the patient; if such reports were not forthcoming, the patient and his guardian forfeited the right of future re-committal in case of relapse.¹⁶

¹⁴ YJ, 23.4.85.

¹⁵ YJ, 12.8.85; this procedure does not seem to have been uncommon -- it was still in use at Brandon Mental Hospital twenty years later, with regard to a patient considered "well enough at the time to take care of himself." See J.J. Anderson to D. Young, 14.2.1908, in Fyle No. 11, Medical Records, Selkirk Asylum. (Hereafter referred to as MR.)

¹⁶ See MR Fyle No. 1, probational bond for T.H.R. (Names of patients are omitted from this report as their inclusion would serve no useful historical purpose. The exception is W.H. Jackson [Honoré Joseph Jaxon], whose case is a matter of public record.)

2) The Patients:

The asylum patients were as diverse as the penitentiary prisoners had been before them. Initially, 28 men and eight women comprized the list of inmates sent from Stony Mountain and the Winnipeg gaol to Lower Fort Garry's temporary asylum.¹⁷ Some were evidently fairly mild in their disorders; many of these were discharged during the course of the year spent at Lower Fort Garry. Others, though badly deranged, were placid, such as Dr. O., who simply lacked ambition and initiative, and did nothing of any consequence except occasionally to play croquet.¹⁸ There was also a good number of severely disturbed individuals, notably two of the women, who according to Young's journal and their medical records, conducted themselves totally without inhibitions, suffered delusions, and had ideas which it is beyond the scope of this study to discuss. They were of many nationalities - Italians, French Canadians (probably métis), Icelanders, the usual quota from the British Isles, and a Danish seaman, who according to his own testimony had once commanded a ship with 69 masts and 39 smokestacks.¹⁹ Some were undoubtedly from well-to-do-families and had been brought up well; one must suspect that many of these had been sent to Manitoba in the hope that their condition would improve in the frontier atmosphere, or at least that emigration would render their unsteady conditions of less embarrassment to their families than if they had stayed at home. In other cases patients far from home enlisted the sympathetic help of friends and relatives to try to secure a release from the asylum and transportation home. This was the case of a young

17 YJ, 20.2.85.

18 YJ, 16.9.85.

19 MR, fyle No. 2.

Nova Scotian butcher whose only ambition was to be released and sent back to Pictou County. This favor was not granted him; he died at Selkirk some years later.

The greatest single disadvantage of Lower Fort Garry, from Dr. Young's point of view, was the ease with which patients could escape. Some merely wandered around outside the enclosure: one went "into the store and picked up an axe which she attempted to use in striking a visitor."²⁰ Others fled over the walls, usually only seeking a holiday. In such cases Young could only muster all the attendants he could spare and send them out to search, while the Winnipeg police were notified by telephone.²¹ The escapes averaged about one per month, but only one patient -- Riel's former secretary William Henry Jackson -- completely avoided capture by fleeing to the United States.

There were other disadvantages to Lower Fort Garry, most of which stemmed from the restricted size of the grounds. "Patients give a good deal of trouble", Young wrote in April, 1885, "by going into the Bursar's and my office and it is almost impossible for the attendants to prevent them."²² The close proximity of all types of patients to each other represented another drawback; "Continual fights show the necessity for having better arrangements for classifying."²³ Perhaps the most bothersome problem of the restricted facilities was the manner in which sexual problems were aggravated. "Having the men and women in close proximity undoubtedly has a bad effect on both", remarked Young, "and am frequently compelled to keep the women inside when frequently they should be out."²⁴ The

²⁰ YJ, 10.4.85.

²¹ YJ, 11.8.85.

²² YJ, 11.4.85.

²³ YJ, 27.4.85.

²⁴ YJ, 14.4.85.

men were undaunted: "Saw him and M. walking over towards the female ward and sent Hill to look after them", Young wrote on another occasion.²⁵ Of course some of the sexual problems were unrelated to the patients' insanity, but simply reflected the fact that men and women, many of them married, were confined for long periods without sexual contacts. "A.K. still depressed when I questioned her as to the cause she pointed to her genitals and said she wanted something."²⁶ Though conditions at the asylum undoubtedly aggravated such complaints, many of them were inherent in the nature of such institutions.

The most famous inmate of the asylum at Lower Fort Garry -- and its most famous escapee -- was William Henry Jackson, self-styled as Honoré Joseph Jaxon, a secretary to Louis Riel during the North West Rebellion of 1885. Unlike his "rebel chief", Jackson was fortunate enough to be judged insane, and was sent to Lower Fort Garry for safekeeping. His intelligence and resourcefulness and the nature of events leading to his committal all promised that he would be a most difficult patient.²⁷ Jackson had been tried for treason, but a trial of less than half an hour saw him acquitted on grounds of insanity. He arrived at the Lower Fort on August 14, 1885, in company with a North West Mounted Policeman named Farmer. He was quartered in Ward 2 (second floor of the penitentiary building), diagnosed by Young as not a confirmed lunatic, but "only a monomaniac, chiefly on religious subjects."²⁸

²⁵ YJ, 20.4.85.

²⁶ YJ, 25.4.85.

²⁷ The best historical account and character sketch of Jackson (I have retained here the form of his name under which he was committed) is Louis Blake Duff's "Amazing Story of the Winghamite Secretary of Louis Riel", Western Ontario History Nuggets (Series # 22). Duff's article combines elements of personal recollection with some decent research; a copy of the article in typescript is filed with Jackson's medical records at Selkirk; MR, Fyle No. 46. See also W.J.C. Cherwinski, "Honoré Joseph Jaxon, Agitator, Disturber, producer of plans to make men think, and Chronic Objector...", CHR XLVI (1965) 122-33, for a scholarly discussion of Jaxon's career as a US labor agitator after his escape from Lower Fort Garry.

He did not appear in Young's Journal for the first month of his stay; he must have pondered escaping at this time, for his major achievement, a letter to his family, stated in part:

I believe the Dr. and most if not all of the attendants would like to see me get away -- but their position as you are probably aware is a somewhat peculiar one -- it being a moot question not less among them than at Gov't headquarters as to whether, whatever public advantages might be derived from my liberation would not be more than counter-balanced by private disadvantages to themselves.... Should I endeavour to take French leave without the Dr.'s certificate or permit, whatever attendant last had the honor of seeing me might in his turn suffer²⁹ loss of position without any compensatory advantage.

The letter was dated September 19th, the same day on which Young finally persuaded Jackson to break a 4-day fast.³⁰

For reasons best known to himself, Young made no immediate mention of Jackson's escape in his Journal. According to Cherwinski, the escape took place "two and a half months" after Jackson was committed. Late in November people began calling to collect Jackson's personal belongings.³¹ Another story claims that Jackson escaped Sunday, November 2, by stealing a minister's team and rig parked outside the Fort, and "did not stop till he had crossed the United States border."³² Jackson was, of course, never recaptured, and despite a prophesy by one of Young's contemporaries that "your conduct will create a big scandal",³³ no reprisals seem to have been taken against the superintendent or attendants.

²⁸ Jackson to his family, 19.9.85, MR Fyle No. 46.

²⁹ Ibid. ³⁰ YJ, 17.9.85, 19.9.85.

³¹ YJ, 25.11.85. ³² Winnipeg Free Press, Prairie Farmer, 30.1.1952; photocopy of a clipping, included in NHSS Report No. 104.

³³ J.A. MacArthur to Young, telegram, 10.11.85, MR Fyle No. 46.

3) Medical Services and Therapeutic Methods:

Notwithstanding Young's inexperience and the makeshift nature of the new Manitoba Asylum, the venture at Lower Fort Garry conformed remarkably closely to contemporary theories regarding asylum management. In the mid-nineteenth century, the primitive customs of imprisoning the insane under inhuman conditions corresponding to the stereotype of 'Bedlam' were dislodged by enthusiastic and optimistic liberal reformers who stressed the need for cures rather than for simple custody of the mentally ill. The ideal asylum in late 19th-century Canada "consisted of an approach to care generally based on a positive view of man's nature and milieu therapy within an organizational structure similar in many respects to a well run Victorian household." The term "milieu therapy" encompasses healthful surroundings, good relationships between staff and patients, education and religious observances, and the inculcation of routine and personal discipline in the patient.³⁴

Under the impulse of Victorian reformers, the insane asylum changed (in theory at least) from a place where lunatics were incarcerated to one where the medical superintendent and staff "maintained a paternalistic role and attempted to use the mental institution as a vehicle for providing what the patient's family or the environment was thought to have failed to offer." Ideally, the institution was small, with no more than 250 beds (preferably private), and was situated "in the pastoral countryside within a few miles of urban areas."³⁵ This description, incidentally, in some respects better fits Lower Fort Garry than it does the institution subsequently established at Selkirk.

³⁴ This passage draws heavily on a most useful historical and historiographical article by H. Stalwick, "Full Circle Plus: Canadian Mental Health Policy in the 1860's and 1960's", presented to the Sixth Annual Meeting of the Canadian Sociology and Anthropology Association, Saint John's, 8 June, 1971. The material quoted is from p. 7. I am indebted to Professor C. Greenland of McMaster University School of Social work, who brought Stalwick's paper to my attention and provided a copy.

³⁵ Stalwick, op. cit., p. 7.

That this approach to the cure of patients was shared by the administrators of the first Manitoba Asylum is borne out by the following excerpts from the report of Manitoba's Inspector of Prisons and Asylums in 1886.³⁶

In connection with the all-important matter of recovery the Medical Superintendent [Young] very righteously remarks that the sooner a patient is brought to the Asylum, after symptoms of mental ailment make their appearance, the greater is his or her chance of recovery; this point cannot be too forcibly impressed upon the minds of the general public. It is no shame to be sick.... It becomes the bounden and honourable duty of every member of the community to use his or her influence to induce relatives or dear friends to waive for the time the strong ties of blood-relationship and affection, and cheerfully permit the sufferers instant removal to the Asylum on the first symptoms of mental aberration.... If the patient can be cured let him or her, by all means, be placed at once in the Asylum, where the process of re-humanization may be commenced immediately, under the care and treatment of a physician well skilled in the diseases of the mind.

The efforts of Dr. Young at Lower Fort Garry must be viewed in light of these commonly-held opinions, and on the whole it must be concluded that he acted in harmony with the prevailing wisdom of the day. While the Manitoba Asylum was at Lower Fort Garry it suffered from many inconveniences, but it did not succumb to what Stalwick identifies as a common problem of 19th-century asylums in Canada: "Within a few decades an almost complete full circle had been turned which began with the introduction of positive reforms followed often within months and certainly within a period of only a few years with overcrowding and a rationing of services."³⁷ How well Young fulfilled his paternalistic functions may be judged from a discussion, below, on routine and special events at the asylum. From the point of view of therapy it is interesting to note that Young's asylum contained

³⁶ Quoted in Ibid., p. 10. The original is in the Journals of the Legislative Assembly of Manitoba (1886), Sessional Papers (No. 2), Schedule No. 18.

³⁷ Stalwick, op. cit., p. 8.

no devices for harsh physical restraint, and the doctor seems to have invoked force only in extreme cases.³⁸

S.P.'s language has become... bad and all other means of restraining her failing [we] have used a towel as a gag and tho[ough] of only temporary value yet can be easily and frequently applied without injury to her and with great relief to all near her.

That is the only recorded instance in Young's journal of the use of physical restraint. Patients who showed any reason at all -- and sometimes those who didn't -- were argued with and cajoled very much as if they were recalcitrant children; the results were often fairly good:³⁹

A.S..... ran into her own room screaming and swearing. I then locked the door which seemed to exasperate her very much. She threw her chamber pot at the door, smashing it in pieces. [I] unlocked the door and took out all the broken pieces of crockery & talked to her for a while about acting in such a way when she commenced to cry and gradually quieted down.

Patients who did not respond to verbal persuasion were often given sedatives. A number of these have been identified through the obscurity of Young's handwriting and his medical short-hand. They include whiskey,⁴⁰ morphine sulphate,⁴¹ potassium bromide and chloral (trichloroacetaldehyde)⁴² and Hyocyamine.⁴³ All the chemical sedatives were administered with a hypodermic needle.

³⁸ YJ, 23.9.85.

³⁹ YJ, 2.3.85.

⁴⁰ YJ, 19.3.85.

⁴¹ YJ, 30.7.85.

⁴² YJ, 10.8.85; the chemical formulae for the three last-named are KBr, KI, and CCl₃CHO.

⁴³ YJ, 20.6.85. All sedatives (except whiskey) were identified with the assistance of the Encyclopedia Britannica, XI edition.

When patients misbehaved grossly they were sometimes obliged to suffer for their mistakes — one, for example, destroyed her bed and was for some time thereafter obliged to sleep on the floor.⁴⁴ This theory of punishment had draw-backs, since Young was not prepared to carry it to the extreme of letting patients go naked or hungry if they destroyed their clothes or refused to eat. In the latter case a nasal feeding tube was available, and it was used at least twice at Lower Fort Garry.⁴⁵

There were of course other medical practices besides mental care to be attended to. A scale was available, permitting Young to record the weights of patients with eating problems.⁴⁶ Iodoform was kept on hand for cuts and minor infections.⁴⁷ During their stay at Lower Fort Garry, all the patients and attendants were vaccinated by Young against smallpox.⁴⁸

4) Routine and Special Events:

The asylum at Lower Fort Garry had a relatively fixed routine of activities, but of course there was no organized program of works such as Bedson had operated with the penitentiary, and a patient who sought for some Unfathomable reason to ignore the daily routine would usually be allowed to go his way. There were constant efforts made to amuse or distract the patients with both work and recreation. There is no fixed bed-time on record — considering the nature of the institutions patients were probably permitted to stay in bed as long as they saw fit, but were encouraged to return there about dark -- it is highly unlikely that they were left with candles or kerosene lamps. There is record of their being sent to bed at 7:30 one night -- their first night at Lower Fort Garry -- but on special occasions they were known to stay up

⁴⁴ YJ, 2.3.85.

⁴⁶ YJ, 21.4.85.

⁴⁸ See YJ, 11 to 14.11.85.

⁴⁵ YJ, 26-27.5.85.

⁴⁷ YJ, 19.7.85.

somewhat later.⁴⁹ There is unfortunately no record of fixed meal-times.

Daily activities varied as much with the season as with the whim of the individual patient. Some activities in which the men indulged included "wheeling barrows"⁵⁰, digging a drain⁵¹, and ploughing, planting, and tending a small garden which included celery, cabbage, cauliflower, and tomatoes.⁵² Women's activities were restricted to such things as sewing⁵³. Of course the vital or even the routine business of the institution was not entrusted to the patients. However, Young recorded that "nearly all the patients do some work, and if suitable employment could be found could get a great deal done."⁵⁴

Several special occasions took place during the stay of Young's patients at Lower Fort Garry. Some were relatively regular and prosaic, like the Saturday night bath; others were unplanned, like the escapes; but there were two sorts of diversionary activity which were both planned and encouraged -- religion and partying. There was apparently no chaplain assigned to the asylum, for services were performed at different times over the course of the year by the following clergymen: Archdeacon Cowley, Rev. C.N. Martin of Mapleton, Fr. Allard of Selkirk, Rev. A. Matheson of Little Britain, and Rev. A.L. Fortin.⁵⁵ On other occasions, when none of these holy men appeared, appropriate passages were read from scripture by individual patients in their wards.⁵⁶ On the rare occasions that the minister

⁴⁹ YJ, 20.2.85.

⁵¹ YJ, 6.4.85.

⁵³ YJ, 26.2.85.

⁵⁵ See YJ for these dates: 8.3.; 5.4.; 29.3.; 15.3; and 13.12.85.

⁵⁶ YJ, 1.3.85.

⁵⁰ YJ, 27.2.85.

⁵² YJ, 1.6.85.

⁵⁴ YJ, 27.2.85.

visited in the morning, patients might spend the afternoon singing hymns and reading scripture.⁵⁷ Attendance at each of these services was of course voluntary, but most of the patients seemed to enjoy the diversion, except for one who "refused to go to Service and said it was all damned nonsense."⁵⁸

The other diversion came in the form of various parties, including dances, and, for the women, a weekly drive into Selkirk during good weather.⁵⁹ The parties were quite frequent, and included evening dances, sometimes with music provided by the attendants or by the Selkirk Brass Band;⁶⁰ on another occasion the patients of Ward 1 had a party of their own, to which they invited those of Ward 2. One of the attendants played the violin and the evening was climaxed when the patients "read an address and bid good-bye to Attendant Hill, who leaves tomorrow."⁶¹ The pièce de résistance was the 25th of May, 1885, which was celebrated as the Queen's Birthday:⁶²

We had various games and dances with music during the day. In evening those who wished went over to female ward and danced from 7.p.m. till 9.p.m. Mr. C. made an oration, Mr. C. and W. R.J. sang songs. Ice cream, cake and lemonade being handed around they all retired after singing "God Save the Queen" having enjoyed the evening very much.

Except when they were working or engaged in some sort of group activity, the patients were quite free to come and go as they wished within their own part of the fort. One wandered around for days "making a large collection of nails, musket balls, and other odds and ends he picks up in the yard."⁶³ This

57

YJ, 19.4.85. YJ, 26.7.85. There is no record of where these services were held or what, if any, religious material was available to the patients between Sundays; shortly after the institution was established Archdeacon Cowley promised to send the patients "some reading matter." (YJ, 25.2.85.)

59

Selkirk Herald 4.4.85 3/b.

58

60

YJ, 25.6.85.

61

YJ, 30.4.85.

62

YJ, 25.5.85.

63

YJ, 13.4. 85.

same patient also developed the habit of walking up to horses and oxen -- these animals were evidently allowed into the yard, which suggests that the gate had been enlarged -- and thrusting his arm down their throats.⁶³ At times Young felt that the patients were insufficiently supervised by their attendants.⁶⁴

Thru some misunderstanding the third flat patients have been allowed to smoke after retiring & was only brought to my notice by a report from Attd. Jones. The Chf. Attend. is responsible for this he knowing and not reporting the fact to me. All the attds. and night watch state they reported to him. I have warned him not to take such responsibility upon himself again.

Apart from mixing of the sexes, patients were apparently allowed to mingle freely amongst each other, except for those disposed to violence, who were confined to their rooms during bad spells. In this way they had the rudiments of a feeling of community with each other, as the following excerpt shows:⁶⁵

T.C. told me he had called all the patients and Attendants together and made a speech and they had all consented to appoint him to telegraph Sir Jno. A. Macdonald to form them into a Comp[any] to go and fight the rebels. He wanted me to promise to send a telegram at once on the fort line.

⁶³ YJ, 25.3.85 and 30.3.85.

⁶⁴ YJ, 16.11.85.

⁶⁵ YJ, 13.4.85.

III: THE WALLS

The walls of Lower Fort Garry were built between 1841 and 1848, principally by the Scottish stone-masons Duncan McRae and John Clouston, who also did much of the stone-work around Upper Fort Garry.¹ Sir George Simpson may originally have planned the walls to rise 14 feet from ground level, but they were never completed much above their present height, which varies from 7 to 11 feet. Nonetheless the walls reputedly extend 6 feet underground, and so in fact reach a total height of about 14 feet.² They are approximately 3 feet thick and are loop-holed for rifle fire at intervals of about 15 feet. The fort enclosure is 450 feet square, making up about 4 1/2 acres. At each corner of the enclosure is a circular bastion measuring around 50 feet in diameter.³

The early history of the walls is obscure; it appears certain, though, that Simpson first determined to have them built about 1838, but was unable to get construction started before 1841.⁴ Robert Watson provides the following notes on the process of construction:⁵

¹ Cf. Dale Miquelon, Lower Fort Garry Preliminary Research Report (NHSS Report No. 44) pp. 3-4; also Robert Watson, Lower Fort Garry (Winnipeg, 1928) p. 9.

² Lower Fort Garry Inventory of Buildings, 1905-06, HBCA B.303/d/286 fo. 48.

³ Watson, op. cit., p. 5. He estimates the diameter of the bastions at 55 feet, a slight exaggeration.

⁴ George Ingram, The South-West Bastion, Lower Fort Garry, Manitoba: Structure and Function (NHSS Report No. 273) p. 3, and Miquelon, op. cit., p. 4.

⁵ Watson, op. cit., p. 10.

Loading and unloading [of stone] was effected by native labour. A box of stout rough boards was used to raise the stone into place and this box was lifted with a windlass and block and tackle. The actual building work was all done during the summer months, the men camping by their work in the evenings and going home on Saturday night for the week-ends.

In 1845, however, the walls were still not completed⁶ and according to a sketch of about 1847 by George Finlay, the north-west corner of the walls including the north-west bastion was then still unbuilt.⁷ This deficiency was almost certainly corrected before the troops left the fort in 1848. Still, the walls remained irregular in height and relatively low, compared at least to those of the upper fort which reached over 15 feet, with 3-storey corner bastions. Moreover, the walls at Lower Fort Garry were capped simply with loose stones. These were removed in 1921 and a layer of bitumen was applied along the top to keep moisture from penetrating into the masonry.⁸

There have always been three gateways through the walls of Lower Fort Garry. The east or main gateway overlooks the Red River, the main highway of the Red River Settlement in the mid-nineteenth century. The

⁶ Ingram, loc. cit.

⁷ See picture No. 6, p. 45, below.

⁸ HBC Land Department Files, London; Report dated 15 May 1925.

names carved into the gateposts are those of soldiers in the Second Battalion, Quebec Rifles, stationed at the Lower Fort in 1870-71.⁹ Though the river was the main transportation route, "Lord Selkirk's Highway" (now Manitoba Route No. 9) is nearly as old as the fort itself, and there apparently has always been a gate in the west wall to provide access to that route. The north gate was originally just the width of a footpath but has been widened, probably in 1885, to accomodate wheeled vehicles.¹⁰ The area south of the fort was of considerable importance during the mid-nineteenth century, but there appears never to have been a gate through the walls on this side. This must have been an annoyance to the workmen of the establishment and there may have been a stile over the south wall behind the fur-loft building.¹¹

⁹ Watson, op. cit., p. 54.

¹⁰ See plan enclosed in J. Wripley to F.W. Holloway, 24.12.84, HBCA B.303/c/1. The sketch bears the notation by the north gate, "Footpath; gateway could be enlarged."

¹¹ This is a theory of Mr. Chism's; he has found an apparent stile in some illustrations of the 1870 period. It is remarkable that this is reputed to be the point where Louis Riel allegedly scaled the walls one night in February, 1870.

IV: THE NORTH-WEST BASTION OR BAKEHOUSE

The north-west bastion of Lower Fort Garry was the last of the four bastions to be built. It links the north and west walls, which were not completed until the period 1846-48, when the Royal Sixth Regiment of Foot occupied the fort.¹ Judging from the peculiar structure of this bastion -- it is the only one not completely circular in shape -- the bakehouse presumably is an original feature and was probably designed specifically for its historical function. It provided hard-tack biscuit for the Northern Department for perhaps thirty years, and the bakery apparatus was not dismantled until 1911. Since then it has served various minor functions -- as an ice-house for the Motor Country Club, and as a workshop for National Historic Sites Service personnel during the restorations of the Big House and the Salesshop-Furloft building.

Structural data on this building is provided in much detail by the attached illustrations. It is only necessary here to add that the entire structure is of stone except for the roof, which is timbered.

In his report on Industrial and Agricultural Activities at Lower Fort Garry, George Ingram reflected the paucity of information on the history of the bakehouse. He noted simply that²

Each spring the oven in the bake house would be prepared [for] the making of 'biscuit for exportation', and from March through June the bakers would be busy at their task. The biscuit was then packed up in casks for some of the posts such as Norway House, or in bags for others such as Upper Fort Garry.

¹ Supra, p. 23.

² (NHSS Report No. 386) p. 92.

The amounts of biscuit to be supplied by the Red River district were fixed annually by the Council of the Northern Department, beginning in 1836. Where the biscuit was baked before the construction of the bake-house at Lower Fort Garry in 1848 is not known, but it may well have been in some other part of the fort.³

Year and Resolution No.	Amount of Biscuit in Cwt.	Year and Resolution No.	Amount of Biscuit in Cwt.
1836 #46	20	1856 #41	30
1837 #45	20	1857 #40	40
1839 #37	20	1858 #41	46
1840 #37	30	1859 #41	46
1841 #35	30	1860 #42	46
1842 #38	30	1861 #47	46
1843 #34	50	1862 #44	46
1844 #42	50	1863 #45	50
1845 #40	50	1864 #42	50
1849 #43	30	1865 #40	50
1850 #44	30	1866 #40	45
1851 #45	40	1867 #41	46 1/2
1852 #47	50	1868 #40	45
1853 #40	26	1869 #40	46 1/2
1854 #43	26	1870 #41	46 1/2
1855 #44	26		

A few features of this list are slightly irregular. The Minutes of Council for 1838 are not entered into the Minute Book. There is no requisition of country produce in 1846 and 1847, presumably because all food produced in the Settlement was required to feed the troops. Country produce was requisitioned in 1848 but the list did not include biscuit. In addition to amounts listed above, the bakery at Lower Fort Garry also had to produce biscuit for consumption in the Red River District itself.

³ Minutes of Council of the Northern Department, HBCA: B.239/k/2-3.

The baker at Lower Fort Garry during and perhaps before the 1860s was Peter Spence (born c. 1828) an English-speaking half-breed who lived nearby the fort in the parish of St. Clements. For his labours he received the relatively high wage of 3/6 per day, a sum seldom equalled except by highly-skilled tradesmen.⁴ Nonetheless Spence supplemented his income from the Company by serving (at least on one occasion) as a trip-man. He was not, therefore, one of the Company's regular servants, and his name appears nowhere in the lists of servants for the Red River District in the 1860s.

At the time of the 1870 census Spence had five children in addition to his wife.⁶ Three of those children were interviewed towards the ends of their lives by Mrs. Margaret Arnett MacLeod, during her extensive efforts to tap the resources of oral history surrounding Lower Fort Garry at its heyday.⁷ Unfortunately Mrs. MacLeod's report of these interviews is almost devoid of dates or Christian names, so it is not possible to ascertain which of the Spence children she interviewed, or the approximate dates of their recollections. There were two older sons,

⁴ See for example HBCA B.303/d/13 fo. 32. These notes are drawn from my study now in progress of labor conditions and wages in Rupert's Land.

⁵ B.303/d/33 fo. 36. Another Peter Spence of St. Clements appears in the 1870 census, but he was a much older man and hardly likely to undertake the arduous York trip in 1868; moreover, only one Peter Spence appears in the Lower Fort Garry saleshop accounts during this period, and he is definitely the baker.

⁶ Manitoba Census, 1870, PAC: MG 9 E 3 Vol. 3.

⁷ PAM: Margaret Arnett MacLeod Papers, File 30.

(Alex, born 1854, and Robert, born 1858) only one of whom evidently survived to the time when Mrs. MacLeod conducted the interviews. He quite vividly recalled the baking activities in the north-west bastion:

I was my father's helper in the bakery as soon as I was old enough to shoulder a bag of biscuit or a sack of flour. After the biscuit was made and cold, it was packed up in sacks that I carried over to the store [probably the Northern Department warehouse at the east gate], there to be put up in cargoes for shipping. From the store I carried back to the bakery a sack of flour and I can remember carrying 16 sacks in one day. I remember this number because it was a heavy task in the day's work of a growing lad.

If we can assume that the "growing lad" was about 12 years old, this recollection can be dated approximately to 1866-70, depending upon which son it was.

Nonetheless, Peter Spence's daughters (presumably Sophie, born 1861 and Nancy, born 1862) could remember with equal clarity that their father used to make biscuit in the ovens by the west gate, in what is now termed the North West Mounted Police Canteen building. This limitation on their recollections suggests that baking was moved from the bastion to the canteen building, perhaps, before either of them was much more than 12 or 15 years old. An appropriate date would be 1875, since the canteen building was used by the military in 1870-71 and by the police in 1874; moreover, the plan of the fort at the time of its occupation by the police identifies the north-west bastion as a bakery.⁸

Though much of this material is necessarily speculative, it is reasonable to assume that the biscuit required for the Northern Department was baked in the north-west bastion continuously from c. 1849 to c. 1875.

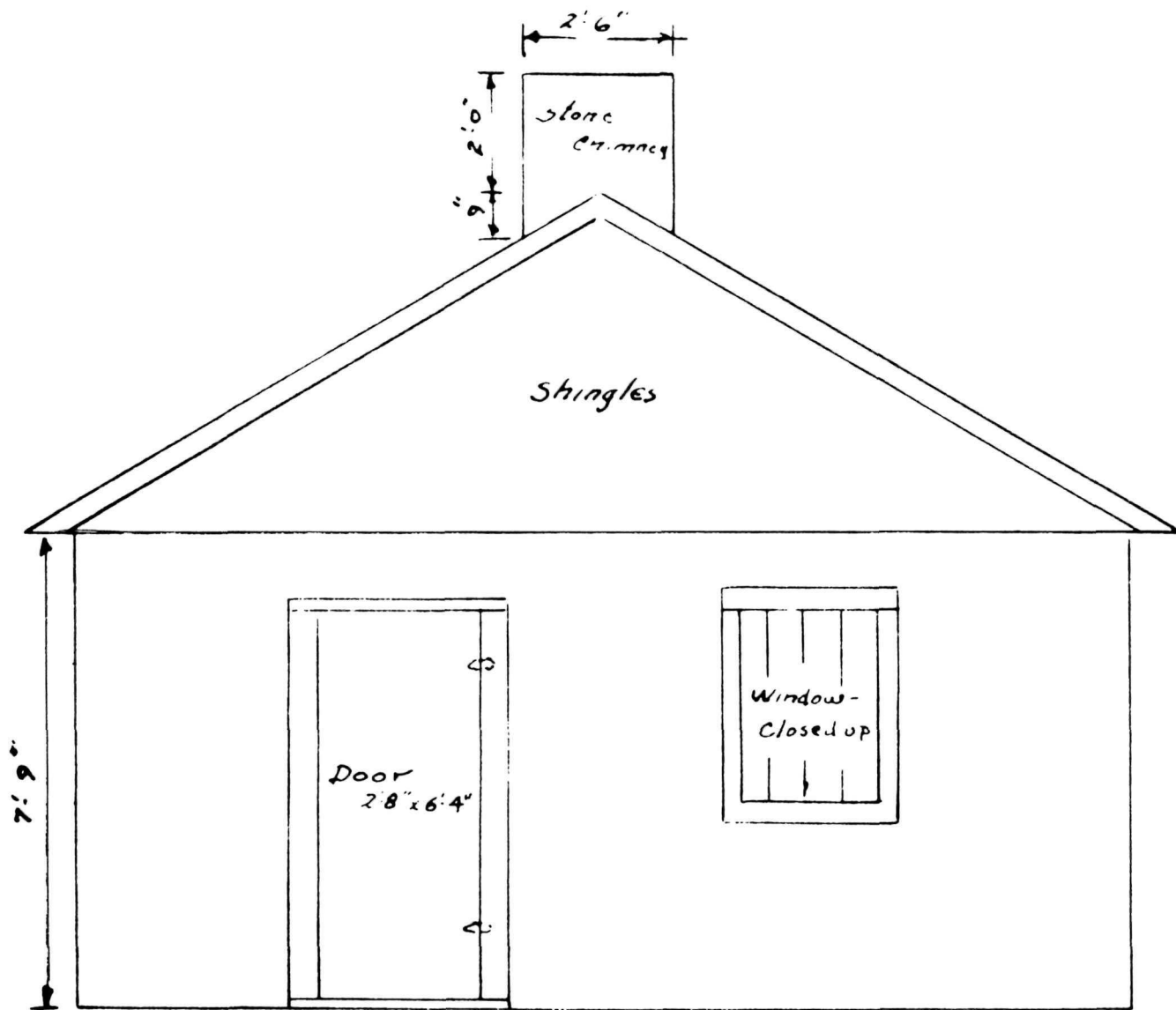
8

Illustration entitled "Lower Fort Garry, Manitoba. Headquarters of Mounted Police"; Ottawa Public Library.

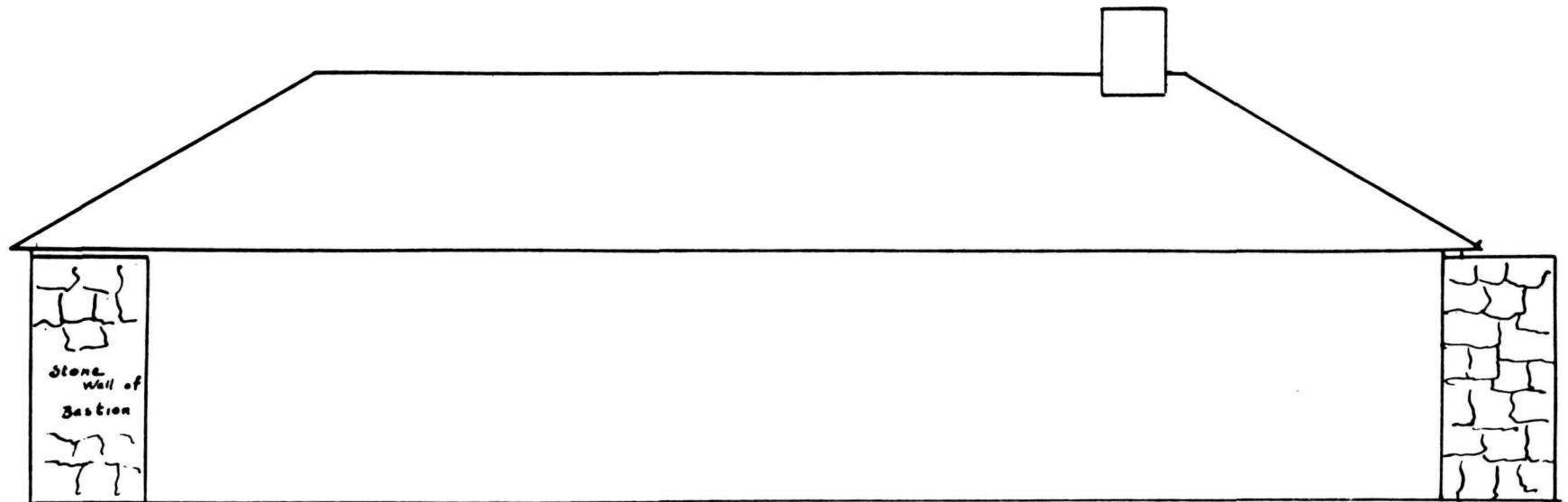
Mrs. MacLeod traced the eventual fate of the ovens in the north-west bastion through an ex-servant of the Hudson's Bay Company. She remarked to him that she felt that bastion probably had been a bakery but that no evidence existed in the building to prove this.

Of course there isn't [he replied]! In preparation for Lord Strathcona's visit to the Fort, just before it was closed, the master of the Fort had me clean the bastion out thoroughly so that no trace of any bakery, ovens, chimney, nor tables was left, no, not a thing was left to show that a bakery had been there.

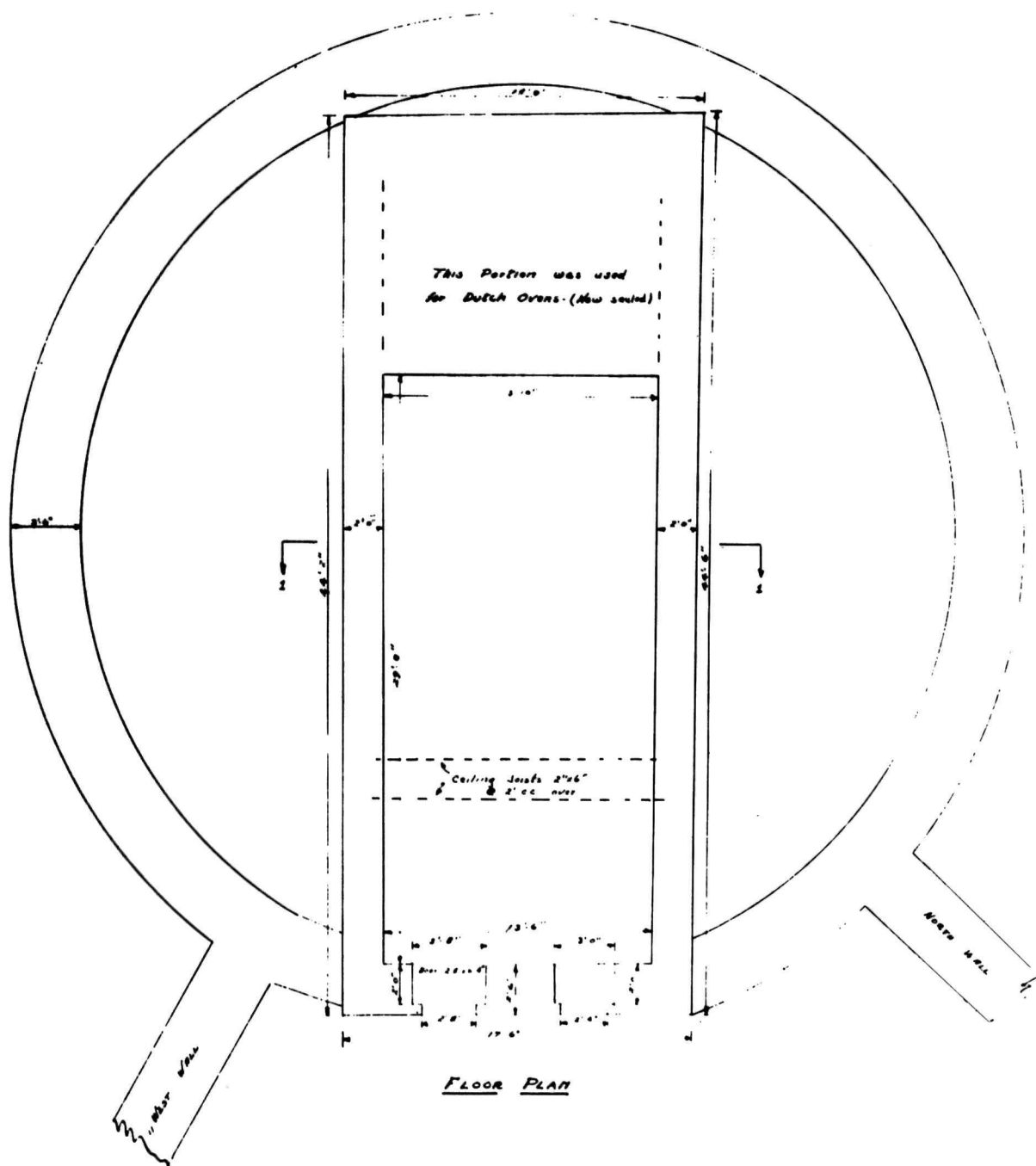
This would seem to suggest that the building served no other purpose at all between its abandonment as a bakery and the Company's departure from the Fort in 1911.



SOUTH ELEVATION



EAST ELEVATION



APPENDIX:

Excerpts from Manitoba Sessional Papers, 1886, relating to the administration of the Provincial Asylum at Lower Fort Garry during 1885.

49 VICTORIA.

SESSIONAL PAPERS (No. 2.)

1886.

SCHEDULE No. 1.

[File No. 8701.]

WINNIPEG, DECEMBER 31, 1886.

Copy of Report of a Committee of the Executive Council, approved by His Honor the Lieutenant-Governor on December 24th, 1880.

The Honorable the Attorney-General submits to Council the following Report:—

That, under the provisions of sub-section two of section ten of the Audit Act, 1884, it is advisable that a special warrant be prepared, to be signed by the Lieutenant-Governor, for the issue of the following amounts, estimated to be required on Special Accounts to cover the different over expenditures under the appropriations in the Attorney-General's Department, for the fiscal half year ending June 30th, 1885, hereinafter mentioned, the amount not having been specially provided for or foreseen by the Legislature, and the expenditure being urgently and immediately required for the public good, that is to say:—

ATTORNEY-GENERAL'S DEPARTMENT.

LUNATIC ASYLUM.

Female attendants.....	\$ 9 34
Drugs	157 25
Conveyance to Asylum.....	35 50
Clothing	230 02
Bedding	5 33
Fittings and furnishing.....	855 15
Incidentals (accountable)	195 16
Fuel	112 21
Stable expenses	300 22
Stationery, printing and postage	171 20
	<hr/> \$2071 47

37
SCHEDULE No. 17.

[File No. 85].

OFFICE OF THE INSPECTOR OF PRISONS AND ASYLUMS,

STONY MOUNTAIN, February 18, 1886.

THE HON. CHARLES E. HAMILTON,
ATTORNEY-GENERAL, WINNIPEG.

SIR,—

I have the honor to transmit herewith my First Annual Report on the condition of the Manitoba Asylum for the Insane, together with the Annual Report of the Medical Superintendent including statistical returns.

I have the honor to be, Sir,

Your Obedient Servant,

(Signed) S. L. BEDSON,
Inspector.

OFFICE OF THE INSPECTOR OF PRISONS AND ASYLUMS,
STONY MOUNTAIN, February 18th, 1886.

THE HON. CHARLES E. HAMILTON,
ATTORNEY-GENERAL, WINNIPEG.

SIR,—

I have the honor to submit my first report upon the condition of the present temporary Asylum for the Insane at Lower Fort Garry, extending over the period between February 20th, 1885, and December 31st, 1885.

On the 20th February, 1885 the temporary Asylum for the Insane at Lower Fort Garry was proclaimed ready for occupation, and accordingly the whole of the insane patients then confined in the Penitentiary were transported by special train to the new premises at Lower Fort, in all truth a happy change for the better for them, and equally a relief to the overstrained energies of the Penitentiary staff. The following table shows the number of patients transferred to the new premises and placed under the care of Dr. Young, the Medical Superintendent; the number admitted since, the number discharged recovered, and the number remaining at midnight 31st December, 1885:—

	Male.	Female.	Total.	Male.	Female.	Total.
Admitted from Penitentiary	27	8	35			
Admitted from other places.....	20	3	23			
				47	11	58
Discharged recovered	8	2	10			
Eloped	1	0	1			
				9	2	11
Remaining at midnight, 31st December, 1885.....				38	9	47

It is gratifying to be able to note here that no patient discharged recovered has been returned, that no deaths have occurred during the year, and that no patient has been confined to bed for any lengthened time with serious illness, all of which is the best of testimony in favor of the healthiness of the situation, and the excellence of the treatment.

The number of recoveries has been very good taking into consideration the number of admissions, and the fact that the greater proportion

of those transferred from the Penitentiary were cases of a chronic nature and most unlikely to recover.

In connection with the all-important matter of recovery the Medical Superintendent very righteously remarks that the sooner a patient is brought to the Asylum, after symptoms of mental ailment make their appearance, the greater is his or her chance of recovery; this point cannot be too forcibly impressed upon the minds of the general public.

It is no shame to be sick. There is no social or other degradation in entering an hospital or asylum as a patient. Now that much interest is taken in the question of insanity, and that it is discussed freely in public and in private, that the old superstitions and prejudices against asylums are gradually disappearing in consequence of the improved administration of these institutions, in respect of more modern methods of treatment, better accommodation and publicity; it becomes the bounden and honorable duty of every member of the community to use his or her influence to induce relatives or dear friends to waive for the time the strong ties of blood-relationship and affection, and cheerfully permit the sufferers instant removal to the Asylum on the first symptoms of mental aberration making their appearance. The change cannot be made too soon, better far prevention than a tardy cure. If the patient can be cured let him or her, by all means, be placed at once in the Asylum, where the process of re-humanization may be commenced immediately, under the care and treatment of a physician well skilled in diseases of the mind. If cure is possible it will be achieved through the means taken to secure this end, if it be not possible, as too often it is not, then the life of the patient will by this process be made more tolerable, and this is the next best thing where cure cannot be looked for.

The Medical Superintendent speaks most feelingly on the subject of the form of committing lunatics, in the first place, to the gaol; it appears to me to be not impracticable to substitute such legislation for the present in use as would render it quite unnecessary to subject a patient, however humble his sphere in life may be, to the humiliation of being sent to gaol, in place of direct to the Asylum. The gaol is no place of confinement for a lunatic even for 48 hours. If he is violent and noisy he disturbs the peace and discipline of the institution, his own disease is aggravated rather than alleviated by the treatment which must necessarily be applied to him while he remains there.

The first ten months of the administration of an institution for the treatment of the insane in our Province has passed away and the Medical Superintendent records (justly may he be proud of it) in his report, that it has not been necessary to use any mechanical restraint; long may this state of things prevail is the most earnest wish of every philanthropic mind interested in the work of successfully treating those unfortunates who are afflicted with diseases of the mind.

The fact that mechanical restraint has not yet been used in the institution while in its infancy, and with a limited staff, bodes well for the future, inasmuch as greater facilities will be at command in the new building, and as the staff is necessarily increased as the inmates increase, there will be greater opportunity for changing a refractory patient from one attendant to another, until the right one to deal with the case is

found who will talk and sympathize with him, treat him with frankness, and will at last gain such moral ascendancy over him that he will be induced to engage in some kind of simple work, diverting his energies from violence and destruction to useful employment, amusement or natural recreation of some kind.

Of all means at our disposal for the accomplishment of partial recovery or complete cure in cases of insanity, work is undoubtedly the most potent; to induce a patient to engage in genial work suitable to his or her tastes is half the battle, it compels the mind to grapple with realities and inasmuch as he or she does, so much the more, gradually and slowly perhaps at first, will he or she be able to shut out the fantastic thoughts and feelings whose existence constitutes insanity. No coercion, however, should be used and by no subordinate officer; mild persuasion should be the motive power, and every inducement held out to the patient to engage in work congenial, so far as is possible, with his or her tastes, as a means to recovery and ultimately complete restoration to mental health. It should not, however, be altogether lost sight of that it is only right that every patient should, as far as is consistent with his health and recovery, be induced to work in order that he may be financially, as nearly as possible, self-supporting.

I have visited the Asylum frequently during the past ten months and have been greatly pleased with the improved condition of the inmates.

The sympathetic devotion of the Matron to her work amongst the women is worthy of the highest praise and it is equally gratifying to be able to gather from the report of the Medical Superintendent the praiseworthy manner in which every official connected with the institution has performed his duties, considering the onerous character of the work, the constant tact required and the continued calls made upon their patience, forbearance and kindness in dealing with the patients and their fancies.

The difficulty which was at first anticipated in the organization of the Institution in the securing of the services of experienced attendants has apparently been completely overcome, to judge from the laudatory manner in which the Medical Superintendent speaks of his present staff, they have accomplished all that could have been expected from the most experienced.

I am in perfect accord with the Medical Superintendent as to the advisability of not removing from the present premises until the new building is finished and all the workmen have left.

As some groundless insinuations have been made by the press regarding the treatment of the insane patient W. H. Jackson, it is only just to the Medical Superintendent to state here that he was not committed as a criminal lunatic, but as an insane person in the usual acceptation of the term; he had improved very much since his admission and would have been released at any time on probation had his friends presented themselves to take care of him until the expiration of his probationary period. He was treated the same as any other patient receiving such extended privileges as his improved mental condition, in the estimation of the Medical Superintendent, warranted. No blame is attached to the

Medical Superintendent in the matter of his elopement, he used his best judgment in the treatment of the patient, and although to have placed so much confidence in his word proved a mistake, still it is one the most zealous and sincere official might very readily have made.

The press, in taking cognizance of the elopement at all, appears to have been writing about a matter of which they, of their own knowledge, knew nothing and to have forgotten that *fama onscit rundo* is a true adage; in the midst of their oblivion they have published and vended embellished rumor in place of unvarnished truth thereby lowering their own dignity and putting their usefulness to an abuse of which they have no reason to be proud.

It is much to be desired that before moving into the new building every effort be made to so equip it with every furnishing and appliance which such an institution requires in order to successfully carry out the method of treatment as is now recommended by the best physicians in the most advanced institutions of the kind, that we be second to none in the skilled treatment of the insane.

I have the honor to be, Sir,

Your Obedient Servant,

(Signed) S. L. BEDSON,
Inspector of Prisons and Asylums.

SCHEDULE No. 19.

[File D 87].

MANITOBA ASYLUM,
LOWER FORT GARRY, January 6, 1886.

S. L. BEDSON, Esq.,
Inspector of Asylums,
Stony Mountain.

SIR,—

In compliance with Sec. 7, Chap. 15 of the Statutes of 1885, I have the honor to submit to you the First Annual Report of the Manitoba Asylum for the Insane.

The Report covers the period from the 20th February to the 31st December, 1885.

In former years, there being no other place in the Province in which the insane could be kept with safety to themselves and others, all persons of unsound mind, who were either dangerous or were without friends, able and willing to look after them, were committed to the Penitentiary. In 1885 it was decided by the Government that the time had arrived when it was necessary to make more suitable arrangements for the care and treatment of this most unfortunate class, and an Act was passed by the Legislature in that year authorizing the building of an Asylum. In the winter of 1884 it was found impossible any longer to provide for the

insane at the Penitentiary, where the whole of the available space was required for the use of the convicts.

The new Asylum not being ready for occupation, temporary quarters were fitted up at Lower Fort Garry, one large building two and a half stories high being divided into wards and rooms for the use of the men, and a smaller building about two hundred feet distant arranged in the same way for the women. As we expect to move into the new building in the course of a few weeks it is unnecessary, as it would not be of any interest to the public to give a further description of the one we at present occupy.

It is needless to say we are looking forward with pleasure to the day when we can take possession of a place which has been constructed specially for the cure and treatment of the insane; there we may expect to find all the comforts, conveniences and congenial surroundings necessary to carry out that mode of treatment which the experience of years in other countries have proved to be the most suitable in bringing about a restoration to mental health. Yet in my opinion the removal should not take place till the whole work has been completed and the workmen have left the building.

On the 20th February last the patients to the number of 35 were transferred by trains from the Mountain here and our work commenced.

The following table shows the number of patients received and discharged; also the number remaining in the Asylum on the 31st December:—

TABLE I.

DISTRIBUTION.						
	Male.	Female.	Total.	Male.	Female.	Total.
Admitted from Penitentiary	27	8	35			
Admitted from other places	20	3	23			
				47	11	58
Discharged recovered	8	2	10			
Eloped	1	..	1			
				9	2	11
Remaining under treatment 31st December, 1885 .....	..	..	..	38	9	47

The largest number under treatment on any one day was fifty (50).

The smallest number under treatment on any one day was thirty-six (36).

None of those discharged were re-admitted. It is a matter for congratulation that there have been no deaths during the year. We have

enjoyed great freedom from any serious physical sickness. No one has been confined to bed for more than a few days at a time and then only for trifling complaints.

The admissions are from all parts of the Province, and by an arrangement with the Dominion Government, from the Northwest Territories and district of Keewatin.

As an Asylum is being built at Regina, the patients from the Northwest Territories will be treated there when it is ready for occupation.

The following Table shows the Municipality or district from which patients were received.

TABLE II.

MUNICIPALITY OR DISTRICT.	Male.	Female.	Total.
De Salaberry	1	..	1
District of Keewatin	6	3	9
Derby	1	..	1
Franklin	1	1	2
Fort Alexander, Indian Reserve	1	..	1
Hespeler	1	..	1
Minnedosa, town of	2	..	2
North Norfolk	2	..	2
Northwest Territories	7	1	8
Not known	2	..	2
Rat Portage	1	..	1
Rockwood	2	..	2
St. Boniface	1	1	2
Selkirk, town of	1	..	1
South Norfolk .....	..	2	2
St. Norbert	1	..	1
St. Paul's	1	..	1
Turtle Mountain .....	..	1	1
Woodlands	1	..	1
Winnipeg	15	2	17
Total	47	11	58

In this place it may be proper to give a few explanations as to the maintenance of patients while in the Asylum. By the Act of 1885 it is provided that the cost of the building and the salaries of officials are to be borne by the Province. The Municipality or District from which a patient is sent is responsible for all other expenses incurred in the care and treatment of such person. The Municipality is empowered to collect from the estate of the patient or from the relations who may be liable

for his support, the whole or a portion of his expenses. It is the duty of the committing Magistrate to enquire into the question as to where the person's residence is and to state it in the commitment.

The Act of 1885 constitutes a person a resident when he shall have resided sixty (60) days in a municipality. An account is opened with each patient when received, and, unless his friends have provided for the payment, all his expenses are charged against the municipality of which he was a resident. Besides the regular rate for maintenance, he is charged with all extras and all articles of clothing which he may receive, also with all breakages and damage he may cause to the Asylum property during his residence. The bills are all sent to the Provincial Treasurer, he renders them to the municipalities and receives the money, which is credited to the Asylum account.

As the majority of the patients, when received, are insufficiently clad, they generally have to be provided at once with a complete outfit of clothing, which has to be renewed from time to time during their stay with us; this forms a large item in our expenditure.

In the case of patients who have no ascertained residence, their maintenance is charged to the Province.

TABLE III.

NATIONALITY OF PATIENTS ADMITTED.

COUNTRY.	Male.	Female.	Total.
England	10	.....	10
Ireland	3	1	4
Italy	1	.....	1
Iceland	1	1	2
Manitoba	4	2	6
New Brunswick	1	.....	1
Nova Scotia	1	.....	1
Ontario	10	6	16
Quebec	3	.....	3
Russia	1	.....	1
Scotland	3	1	4
United States	7	.....	7
Unknown	2	.....	2
Total	47	11	58

TABLE VI.
OCCUPATION OF PATIENTS ADMITTED.

OCCUPATION.	Male.	Female.	Total.
Blacksmiths	2	..	2
Bookkeepers	1	..	1
Bricklayers	1	..	1
Butchers	3	..	3
Clerks	2	..	2
Common Laborers	10	3	13
Draughtsman	1	..	1
Dressmakers .....	..	1	1
Farmers	9	4	13
Fishermen	1	..	1
Hotelkeeper	1	..	1
Hunter	1	..	1
Journalist	1	..	1
Lawyer	1	..	1
Lightning rod Agent	1	..	1
Mill hands	1	1	2
Manufacturer	1	..	1
Policeman	1	..	1
Painter	1	..	1
Physician	1	..	1
Sailor	1	..	1
Student	1	..	1
Tailors	1	1	2
Telegraph operator	1	..	1
Traders	1	1	2
Teamster	1	..	1
Unascertained	1	..	1
Total	47	11	58

TABLE VII.

DURATION OF DISEASE PREVIOUS TO ADMISSION.

DESCRIPTION.	Male.	Female.	Total.
Under two months.....	1	..	1
Two months and under six	7	2	9
Six months and under twelve	6	..	6
One year and under two	7	4	11
Two years and under five	11	4	15
Five years and under ten	7	..	7
Ten years and under twenty	4	1	5
Twenty years and over	4	..	4
Total	47	11	58

TABLE VIII.

DEGREE OF HEREDITY.

DESCRIPTION.	Male.	Female.	Total.
Paternal	3	..	3
Maternal	4	4	8
Brother or Sister	7	..	7
None	4	..	4
Unascertained	29	7	36
Total	47	11	58

TABLE IX.

AGE OF PATIENTS ADMITTED.

DESCRIPTION.	Male.	Female.	Total.
Under 12 years	1	.....	1
12 to 20 "	3	.....	3
20 " 25 "	3	3	6
25 " 30 "	6	3	9
30 " 35 "	7	1	8
35 " 40 "	6	1	7
40 " 45 "	7	2	9
45 " 50 "	4	1	5
50 " 55 "	4	.....	4
55 " 60 "	3	.....	3
60 " 70 "	3	.....	3
Total.....	47	11	58

TABLE X.

FORM OF DISEASE.

DESCRIPTION.	Male.	Female.	Total.
Mania, Acute	14	4	18
" Chronic	7	4	11
Dementia	10	1	11
Melancholia	9	2	11
General Paresis	2	.....	2
Epilepsy	1	.....	1
Imbecility	4	.....	4
Total.....	47	11	58

The cases in which any cause was assigned for the disease were so few that no table has been prepared showing them.

The number of recoveries to the whole number under treatment is not large, but if the patients received from the Penitentiary are excluded and only those received from other places considered as admissions for the year, then the percentage is a very good one, there having

been ten recoveries to twenty-three admissions. In this connection it is well that the public should understand clearly that the earlier a person suffering from mental disease is brought under treatment the greater are the hopes of effecting a cure. This is generally recognized in other diseases, but in insanity it is only after all other means have failed and the patience of the friends has been exhausted that the Asylum is thought of as a last chance; the same course is pursued in the Gaols. An acutely maniacal person who cannot be restrained at home is taken before a magistrate and committed to gaol and there kept till this stage passes off when he may be discharged to be brought back again in a worse state than the first, or till he passes into a state of dementia, from which there is so little hope of recovery, when he is sent to the Asylum, not for treatment, but to be got out of the way, and there he will probably spend the remainder of his life.

The Act of 1885 provides that no insane person shall remain in a Gaol longer than forty-eight hours unless under exceptional circumstances, but heretofore this provision seems to have been almost entirely overlooked or else there must have been exceptional circumstances in every case except one.

The relations and friends of an insane person should see to it that if it is necessary for his own or others safety that he should be sent to gaol that his stay there is as short as possible.

It would seem as if the gaols were the proper place for the treatment of recent and presumably curable cases while the Asylum is a receptacle for the chronic and hopeless ones.

When the Asylum was established it was with the view of securing to this class of sick people an hospital where they would be supposed to receive such treatment as would lead to a restoration of health, or at least an alleviation of their disease; also, but only secondly, to provide a home for those, who though unlikely to recover, yet required a care and overlooking which they could not receive elsewhere.

Patients can be sent to the Asylum by three different processes:

1st. By warrant of the Lieutenant-Governor. By this mode a complaint is made before a magistrate, who commits the person to gaol. He is then brought before two magistrates who examine into the case, take the evidence of two medical men, and if satisfied of his insanity, commit him to gaol as insane. The Lieutenant-Governor then grants his warrant to commit him to the Asylum.

2nd. By warrant of a Judge, Stipendiary Magistrate, or two Justices of the Peace, and the certificate of two medical men, a person may be sent direct to the Asylum, without having ever gone through the indignity of being sent to gaol for the offence of being sick.

3rd. By an application to the Superintendent of the Asylum by his relatives or friends asking for his reception, accompanied by the certificates of two medical men, as to his mental unsoundness, and an undertaking to defray all his expenses while under treatment.

It will, therefore, be seen that there is no actual necessity for sending any insane person to Gaol, unless he has no friends, or is so violent or acts in such a way that he cannot be temporarily restrained in any other way.

We have no means of knowing at present what the number of insane persons is in the Province but it must greatly exceed those in the Asylum and confined in Gaol. In Ontario and Michigan it is stated that the proportion of the insane to the general population is one in every eight hundred or a thousand. According to the last census of the United States the proportion was about one in every five hundred, the proportion being greater in the Eastern and older States. Our population being, according to figures furnished by the Department of Agriculture, Statistics and Health, 95,705 exclusive of an Indian population of 9,914; we may calculate that there are at least one hundred insane persons in the Province for whom provision will require to be made. The State of Minnesota, with a population of 776,884 in 1880, is credited by Dr. Silvester in a recent paper with 2,000 insane, 1,100 of whom are in Asylums.

Among our patients are some who were sent out by their friends in the old country as emigrants and who, within a short time of their arrival in the Province, were taken in charge of by the police and after due enquiry declared to be insane and sent to Gaol, and have ever since continued to be a charge upon the public.

In the general treatment of patients it is considered advisable to give them as much liberty as is justified by an experience of their cases, and to remove as much as possible, consistent with their own safety and that of others, all appearance of restraint which to every one, sick or well, is so irritating. So far we have been able to get along without resorting to mechanical restraint. When a patient becomes so violent or destructive as to endanger the safety of others he is secluded in his own room till the paroxysm has passed; when alone in his own room he generally quiets down in a short time and is then allowed to return to the general ward and associate with the others. If, instead of secluding him, a sufficient number of attendants were detailed to restrain him as advised by some authorities, he might require the efforts of the whole staff and the other patients would be left to care for themselves. We have, fortunately, had no representative of that class so obnoxious to Asylum discipline called insane criminals, though the contrary has been asserted by certain newspapers, both in this and the other Provinces in referring to the elopement of W. H. Jackson. It may be as well to state here, since so much interest was taken in his case, that he was exactly on the same footing as any other patient in the Asylum. He was neither allowed more or fewer privileges than were granted to others who had shown by their conduct and mental improvement that they might be trusted outside the walls without an attendant. His escape was entirely due to the fact that more confidence was placed in his word than after events justified. As he was harmless and quite able to earn his own living no one had any interest in keeping him here except his friends, and they only that he might secure that treatment which they hoped would eventually lead to his complete restoration to health. As was said some years ago by D. T. Workman, of Toronto, "it is to be hoped the time will never come when the insane will be unable to elope from Asylums."

All patients who are physically fit go outside morning and afternoon for a longer or shorter time according to the weather; in fine days it frequently happens that the wards are entirely deserted. As many as possible are induced to work or join in some amusement. In the spring we broke a piece of land, fenced it and had a very fair garden, from which we got all our vegetables for summer use. When we remove to Selkirk we will have plenty of ground and then all who can be induced to do so will find congenial and healthy employment outside. The object in employing patients is not with the expectation or for the purpose of making a profit for the institution out of their work, but principally for the benefit of the patients themselves; in the case of restless and excited ones it diverts their muscular energy and activity which would otherwise find vent in dangerous or destructive actions into useful work, and help to prevent the thoughts of others from dwelling on themselves and their various delusions. For the females, owing to the smallness of the grounds where they would continually be brought into contact with the men, it has been impossible to provide as much out-door work and amusement as they would have liked; inside they have accomplished a great deal, making all their own clothing, the sheets, pillow cases, towels, &c. for the wards, mending and making up clothing for the men, besides doing a great deal of household work. The amusements consisted of walks and drives, ball, croquet and skittle-playing, cards, checkers, dominoes, &c., concerts and dances.

There has been no library established yet, as we have no place about the building where books, &c., could be kept, and no rooms in the wards where they could be taken to be read. It is hoped this will be supplied during the coming year, and it may not be out of place to remind editors of newspapers in the Province and Territories that our patients have not forgotten them and still take an interest in all the news of their districts and would feel very grateful if a copy of the paper they were accustomed to associate with home were sent here.

Nearly every Sunday, either in the morning or afternoon, divine service has been held in the male dining room, and was well attended by a majority of the inmates, who apparently appreciated it as much as other congregations do. It is a short service, not lasting longer than three quarters of an hour, and was conducted by the ministers of the various denominations in the neighborhood. In an institution of this kind, where there are so many different religious beliefs represented, this appears to me a better plan for giving religious instruction than to appoint a chaplain of any one denomination.

The Asylum was visited in March and November by the Grand Jury of the Eastern Judicial District, on both occasions they were accompanied by members of the Government and members of the Legislature. They made a thorough inspection of the whole premises and saw all the patients.

In the organization of the Asylum it was anticipated that great trouble would arise through the want of experienced attendants and that especially would this be the case in the female department. This difficulty was entirely overcome by the appointment to the position of Matron and Chief Female Attendant of Miss McBride who for over two years

was Chief Female Attendant at the London, Ontario, Asylum. She has proved herself peculiarly well fitted for the position by the very great improvement she has brought about in the female patients and the efficiency with which she has discharged her duties particularly belonging to her as Matron.

Mr. Mailhot has acted as Storekeeper and Chief Male Attendant and in both capacities has given entire satisfaction. The attendants, male and female, have all performed their difficult and trying duties in an exemplary manner. The patience, kindness and tact shown in the management of the patients could not be exceeded, no complaint of ill treatment with the slightest foundation in truth has been brought against any of them by the patients.

The relish with which the meals are eaten vouch for the cooking department.

Mr. Coleleugh the Bursar has not only managed his own department with great zeal and economy but has cordially assisted me in every way in his power in the general organization of the Institution.

The frequent visits of the Hon. Mr. Norquay were always welcome to the patients who saw by the minute enquiries he made as to their welfare that he took a great personal interest in showing that everything possible was being done for their care and comfort.

TABLE XI.

SHOWING THE EXPENDITURE OF THE MANITOBA ASYLUM FOR THE YEAR
ENDING 31ST DECEMBER, 1885.

Furniture and furnishings	\$ 2288 44
Light and fuel	1815 45
Repairs and alterations	516 27
Entertainments and amusements	26 70
Stable, including stock	799 40
Laundry, soap and cleaning	587 46
Bedding, including beds and blankets	1982 08
Rations	5939 83
Medicines and medical comforts	421 45
Clothing and shoes	1093 57
Library	37 10
Stationery, printing and postage	416 37
Telegraph and telephone	55 37
Religious instruction	89 25
Incidentals	77 00
Garden	85 38
Elopements	61 05
Salaries and wages	6044 31
	<hr/>
	\$22936 48
Less supplies on hand, including vegetables, hay and fuel	1049 21
	<hr/>
The rate charged for maintenance was 75c. per day.	\$21887 27

ACKNOWLEDGEMENTS.

Our thanks are due to the following clergymen who kindly conducted divine service for us during the year:—

Ven. Archdeacon Cowley, Dynevor.

Rev. Father Allard, Selkirk.

" Alex. Matheson, Little Britain.

" N. Martin, Mapleton.

" E. L. Fortin, St. Andrew's.

" W. H. Buckler, Selkirk.

" W. C. Brydon, Selkirk.

" Father Madore, Fort Alexander.

To Dr. W. R. D. Sutherland, of Winnipeg, who presented a Garden Swing Chair for the use of the female patients.

To the Selkirk Brass Band for an evening's amusement during the summer.

To Mr. F. W. Holloway and Mr. R. Dickson for newspapers and to Mr. A. J. Peers for furnishing the music for our frequent dances.

Yours Respectfully,

(Signed) DAVID YOUNG,
Medical Superintendent.

SCHEDULE No. 20.

[File 8646].

SPECIAL PRESENTMENT OF GRAND JURY AT THE AUTUMN ASSIZE FOR
THE EASTERN JUDICIAL DISTRICT, RESPECTING THE
MANITOBA ASYLUM FOR THE INSANE.

MAY IT PLEASE YOUR LORDSHIP:—

The Grand Jury in their previous presentment intimated to you their intention of visiting the Lunatic Asylum at Lower Fort Garry. They did so yesterday and beg to report that they consider that the authorities have made the best possible arrangements and alterations that such temporary premises admit of. Everything about the building and the grounds surrounding it is neat and clean, the ventilation of the building thorough, and the comfort of the inmates well attended to.

The officials, both in the male and female wards, are kind and considerate. We had an opportunity of inspecting the bill of fare for last week and the present week, and find that the Asylum diet is plentiful and good.

Your Grand Jury also proceeded on to Selkirk and examined the new Asylum in course of erection there and which is now approaching completion.

Although the new Asylum, as stated, is not ready for occupancy and therefore possibly not properly a subject for our observations or report. Your Jurors, nevertheless, deemed it a duty to visit it in order to judge

of the eligibility of the location and the state of the building as well as its general fitness for the purposes for which it is intended.

As to the location, the statement that the Asylum has been erected in a marsh or bog is entirely unfounded.

There is unmistakable evidence now existing that the land in the immediate vicinity of the building has recently been cultivated.

It is now covered with such grass as only grows on dry prairie, and although quite level is dry and has a gradual fall towards the river.

The building presents a substantial and pleasing exterior, and from an examination of it in a more detailed manner would seem well adapted for the comfort and safety of the unfortunates who will be compelled to find a home within its walls.

The manner of its erection was carefully examined and enquired into, and from the casement to the highest flat presents no feature from which any anxiety need exist as to its stability.

The Jury were agreeably surprised at the insignificance of the settlement of the building, the few cracks in the main walls are quite unimportant. There are some small cracks in some of the interior walls but they were chiefly in the partitioning or cross walls, those upon which the stability of the superstructure could scarcely be said to depend, and seemed to have been occasioned by the natural subsidence of the structure when the frost was coming out of the building and the ground.

The walls appeared to be perfectly plumb or vertical and there was no unevenness in the floors. This fact gave the Jury strong evidence that no defect existed in the foundation. It was affirmed by the contractor, the workmen and others, that no settlement had taken place for the last two or three months, and your Grand Jury therefore think that it might fairly be supposed that no further difficulty in this respect need be apprehended.

While at the Asylum at Lower Fort Garry the Jury enquired into the recent escape of William Henry Jackson, one of the inmates. The Medical Superintendent explained that Jackson was sent to the Asylum as an ordinary patient, that lately he had become rapidly convalescent and would probably in a very short time have been discharged, that he had recently been allowed the privileges extended to convalescent patients, of walking outside the Asylum grounds and that he had taken advantage of this privilege to make his escape.

The Medical Superintendent also informed the Jury that the morning after the escape he had commenced a search and had also on that morning communicated the escape to the Provincial Police with the request that they would assist him in his efforts to capture Jackson.

While a Jury do not profess to be competent to offer advice as to the regulations that should exist in Lunatic Asylums, yet the very fact that Jackson escaped suggests to their minds the necessity of patients having outside privileges being carefully watched over by guards.

(Signed,)

W. B. SCARTH,
Foreman.

SCHEDULE No. 21.

[File No. 8591].

THE INVESTIGATION INTO THE CAUSE OF THE ESCAPE OF W. H. JACKSON,
AN INSANE PATIENT, CONFINED IN THE LOWER FORT GARRY ASYLUM.

The following investigation was held by the Attorney-General, at the Lower Fort Garry Asylum, on the Twenty-first day of November, A.D., 1885.

Dr. Young, the Medical Superintendent, upon examination said:—

"That the insane patient, W. H. Jackson, was received into the Asylum 'on the 14th of August, 1885,' the warrant was signed 'E. Dewdney, 'Lieutenant-Governor,' and was dated 8th August, 1885. Jackson's full name was William Henry Jackson. I placed him under the same care as lunatics of that class of insanity received."

Attorney-General—"When did you see him last?"

Dr. Young—"On Sunday, 1st November."

Attorney-General—"What liberty had he?"

Dr. Young—"He was allowed out walking outside of the walls. At first I kept him in close custody but latterly he was allowed more liberty. I made no special exception in his case. In all cases of lunacy similar to his I would have allowed the same latitude."

Attorney-General—"At what time was it he left?"

Dr. Young—"He left about two o'clock. He was on the outside of the wall, when one of his companions was passing on the outside of the wall called out 'Hello, Jackson, I am going for a walk.' Jackson, instead of asking permission, jumped over the wall. It was not reported to me until afterwards."

Attorney-General—"Who was his guard?"

Dr. Young—"The Chief Attendant Mailhot. Had he made a request he would have been allowed to go out. The only reason there would be for calling him back would be for breaking the rule by jumping over the wall."

Attorney-General—"Had he any visitors?"

Dr. Young—"Yes, his sister was here to see him. The last time she was here was on Sunday, October 20th."

Attorney-General—"Had he any visitors in the interval?"

Dr. Young—"No, the only visitors he had was his brother shortly after his arrival here, and his sister afterwards."

Attorney-General—"Did he go out often?"

Dr. Young—"Yes, he was in the habit of going out constantly. His unusual absence was not noticed until he did not return that evening. I had taken the privilege away from him two or three times because he had stopped out late."

Attorney-General—"You took no steps to find him that night?"

Dr. Young—"No."

Attorney-General—"When did you first communicate with the Provincial Police?"

Dr. Young—"The next morning. I did not feel much anxiety. It would be about ten o'clock when I communicated with the police. I

"gave him time to find his way back, for fear that he had lost his way in the woods during the night."

Attorney-General—"That morning did you send out any one?"

Dr. Young—"I sent out two men, one of the attendants and a man up the river. It would be about ten o'clock in the morning. I telegraphed to Regina the next day."

Attorney-General—"Then you only made an official report to Governor-Dewdney?"

Dr. Young—"Yes."

Attorney-General—"When was the Inspector down last?"

Dr. Young—"The Inspector was here the Tuesday following the escape."

Attorney-General—"Did he make any suggestions as to what actions to take?"

Dr. Young—"He could not suggest anything more than what had been done."

Attorney-General—"Then your action really consisted in the searches made in the morning and in telephoning the Provincial Police of the escape?"

Dr. Young—"I communicated with his sister. I telegraphed her on the Tuesday."

Attorney-General—"Did he have any money?"

Dr. Young—"No, I thought he would try and get some money from his sister and make his way out to Regina to see Riel before he died."

Attorney-General—"Did you have any reason to suspect he would escape?"

Dr. Young—"No, he had been out once before, and he was very much annoyed because I had sent after him; he considered he was out on 'parole' and that I should not have sent for him."

Attorney-General—"Did you give the Police information as to his personal appearance?"

Dr. Young—"Yes, I supposed too that Constantine knew him personally. I told the Police as far as I could, a description of him. I also telegraphed Regina."

Attorney-General—"Where is the telegraph?"

Dr. Young—"It is at Winnipeg. I telephoned the telegraph office."

Attorney-General—"Sutherland is stationed at Selkirk, did you communicate with him?"

Dr. Young—"I did not communicate with the Police at Selkirk, as I was certain he had not gone that way."

Attorney-General—"Did his sister see you about the matter?"

Dr. Young—"Yes, she came down here the Sunday after."

Attorney-General—"What was the object of her visit?"

Dr. Young—"She wanted to assure me that she had not assisted him in any way. When she went back to Winnipeg she told me that she had heard from him and that he was at St. Vincent. She wanted me to go for him. I told her that she would have to bring him on this side of the line."

Attorney-General—"Had you any suspicions that any one was assisting him to escape?"

Dr. Young—"I am sure of it—that no one was trying to do so. It was my intention to have discharged Jackson from the Asylum as soon as ever he was well. If it had not been for the fact that Riel's trial was coming on, I would have felt justified in discharging him before, but I wished to see if Riel's execution would have effect on his mind again."

Attorney-General—"As a matter of fact you did not consider him dangerous then?"

Dr. Young—"No. I would have considered that he was entitled to his discharge, and I expected to have been able to decide as to his mental condition after the Riel matter was disposed of."

Attorney-General—"Then he was treated the same as any other patient?"

Dr. Young—"Yes."

Attorney-General—"Was he not confined as a criminal lunatic?"

Dr. Young—"No, I had nothing to do with him as a criminal. The warrant of commitment was the same as that used in ordinary cases of lunacy, and I gave him the same treatment as lunatics of the same class of lunacy. I hear that one of his fellow-patients, 'a legal crank,' had been scaring him by telling him that he would be tried when he was discharged. This may have frightened him. I do not suppose that he intended to go when he jumped over the wall. It may have been impulse afterwards. He went all the way down to Selkirk alone to meet his sister when she came to visit him."

Attorney-General—"When was it that his sister heard from him?"

Dr. Young—"It was not until Monday morning (the 9th Nov.) that his sister heard from him at St. Vincent."

Mr. Maillhot (the chief attendant) was called and examined as follows:

Attorney-General—"When did Jackson escape?"

Maillhot—"It was on Monday, the 2nd November."

Attorney-General—"When did you see him last?"

Maillhot—"I saw him about 2.30 or 3 p. m. I was here on that day."

Attorney-General—"Who was in charge of him?"

Maillhot—"Mr. Pears, the attendant of ward one, would be specially in charge of Jackson. I was in the ward when he was let out. I did not see him after that."

Attorney-General—"When was it reported?"

Maillhot—"When he jumped the wall it was reported to me about ten minutes afterwards; he would have to have leave before going out to walk, that is the regulation."

Attorney-General—"Do they apply to you or to the Superintendent for leave?"

Maillhot—"Sometimes to me. When he left he did so from his work."

Attorney-General—"Had he any visitors that day or on the previous day?"

Maillhot—"No, a week or so before his sister came to see him, and she was the only visitor he had that I know of."

Attorney-General—"Did he get any letters?"

Dr. Young—"All the letters came to me. There were some letters for Jackson which were examined. There was nothing in them to indicate any attempt to escape."

Attorney-General (to Maillhot)—“Had you any reason to suspect that he was going to escape?”

Maillhot—“No.”

Attorney-General—“How was he treated?”

Maillhot—“He was treated the same as any ordinary lunatic.”

Attorney-General—“Was it customary for them to remain out so long?”

Maillhot—“Yes, they often go out and stay until supper time. They have to be in then. I would not have any suspicion raised with reference to an escape until that time. I reported to Mr. Young about 4 o'clock about his jumping over the wall.”

Attorney-General—“Well, what did you do when he did not come into supper?”

Maillhot—“I thought that he was lost in the woods. He lost his way once and came back very late. As it was dark I did not consider that it was any use to make a search then. About half-past ten the next morning I sent out one of the attendants in the direction he had gone the previous day to look for him.”

Attorney-General—“Did any one else go?”

Maillhot—“Yes, there was a man went with him. The Superintendent sent him. They came back about six in the evening. They reported that they could find no trace of him. They made full enquiries of the people.”

Attorney-General—“Were the Police notified?”

Maillhot—“Yes, on the next day I went down to Winnipeg and St. Boniface. I went and saw his sister. I also saw the Chief of Provincial Police, at Winnipeg, and saw the Chief of St. Boniface. I had telephoned Constantine and asked him to telegraph to Brandon and Regina. I could get no trace of him at all. I thought he might have tried to walk to Regina. My whole object in going down was to try and trace the patient.”

Attorney-General—“When did you first hear of him again?”

Maillhot—“It was when I heard by telephone from his sister that he was in St. Vincent.”

Attorney-General—“Did you telegraph the Police at the lines?”

Maillhot—“No, I left the matter entirely in the hands of the Provincial Police as soon as I had communicated with them.”

Mr. Pears (the attendant of ward one) was called, and examined as follows:—

Attorney-General—“Jackson was under your care?”

Pears—“Yes, he was in my ward during the whole time he was here.”

Attorney-General—“Do you remember when he escaped?”

Pears—“I do not remember the day exactly, I think it was on Monday evening.”

Attorney-General—“You were in charge of him that day?”

Pears—“I was.”

Attorney-General—“How did he come to get away?”

Pears—“I was letting the patients out for recreation. I had stayed behind in the ward and when I came out he was missing. It would be about half an hour afterwards that he was missing.”

Attorney-General—"When you let them out whose duty is 'it to watch them?"

Pears—"It is the duty of any attendant who may be in the yard to keep an eye on all the patients, whether in his ward or not. I was in my ward at the time. When I let them out there was an attendant in the yard outside."

Attorney-General—"When he jumped over the wall did you suspect he was going to escape?"

Pears—"No, I thought he was just going for a walk. There was nothing unusual in his being out so long. The patients were allowed out but they never stayed out longer than six o'clock, when supper was ready. When he did not return at six my suspicions were aroused. I thought then that he had lost his way in the woods. It was too dark to search for him that night."

Attorney-General—"Did you look for him the next day?"

Pears—"Yes, I was one of the men who searched for him. I started about ten o'clock the following morning. There was another man went too. I went one way and he went another. We made enquiries but could find no trace of him. I returned about seven o'clock in the evening. I was all day looking for him. I went every place where I thought I might likely find him."

Attorney-General—"Who was the other man?"

Pears—"John McDonald, a constable."

Attorney-General—"You did all you could?"

Pears—"As far as I am aware, all that could be done was done. I looked for him the following day again."

Attorney-General—"Had he any visitors?"

Pears—"None, that I know of, that day. He did not get any letters that day. I had no suspicions of his attempting to escape."

Attorney-General—"He was treated the same as the other patients?"

Pears—"Yes, the same care was taken of him as of any other patient of a like character. He had no exceptional privileges."

Attorney-General—"What was he doing before he went?"

Pears—"He was busy carpentering."

Attorney-General—"Why did he jump over the wall?"

Pears—"One of his companions was passing on the outside of the wall who called out to him to come for a walk. Jackson jumped over to join him."

Attorney-General—"When did his companion come back?"

Pears—"He returned before six."

Attorney-General—"How did they come to separate?"

Pears—"I asked him where he left Jackson, and he said he accompanied him for a few hundred yards, when Jackson wanted him to go through the woods. He did not want to go into the woods, so they parted, and he did not see Jackson since."

Attorney-General—"Did Jackson want him to escape?"

Pears—"No, there was nothing said about escaping."

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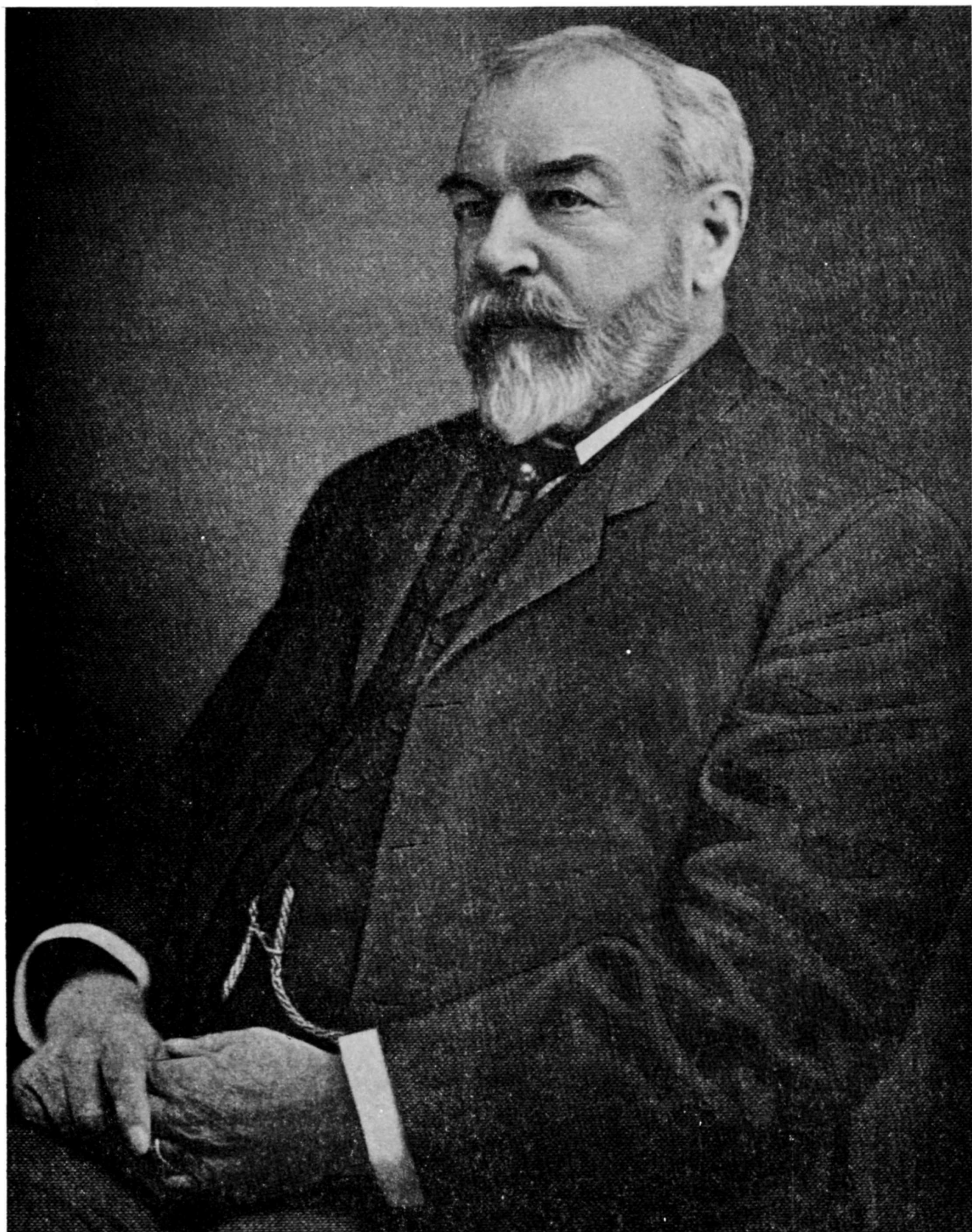
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ILLUSTRATIONS

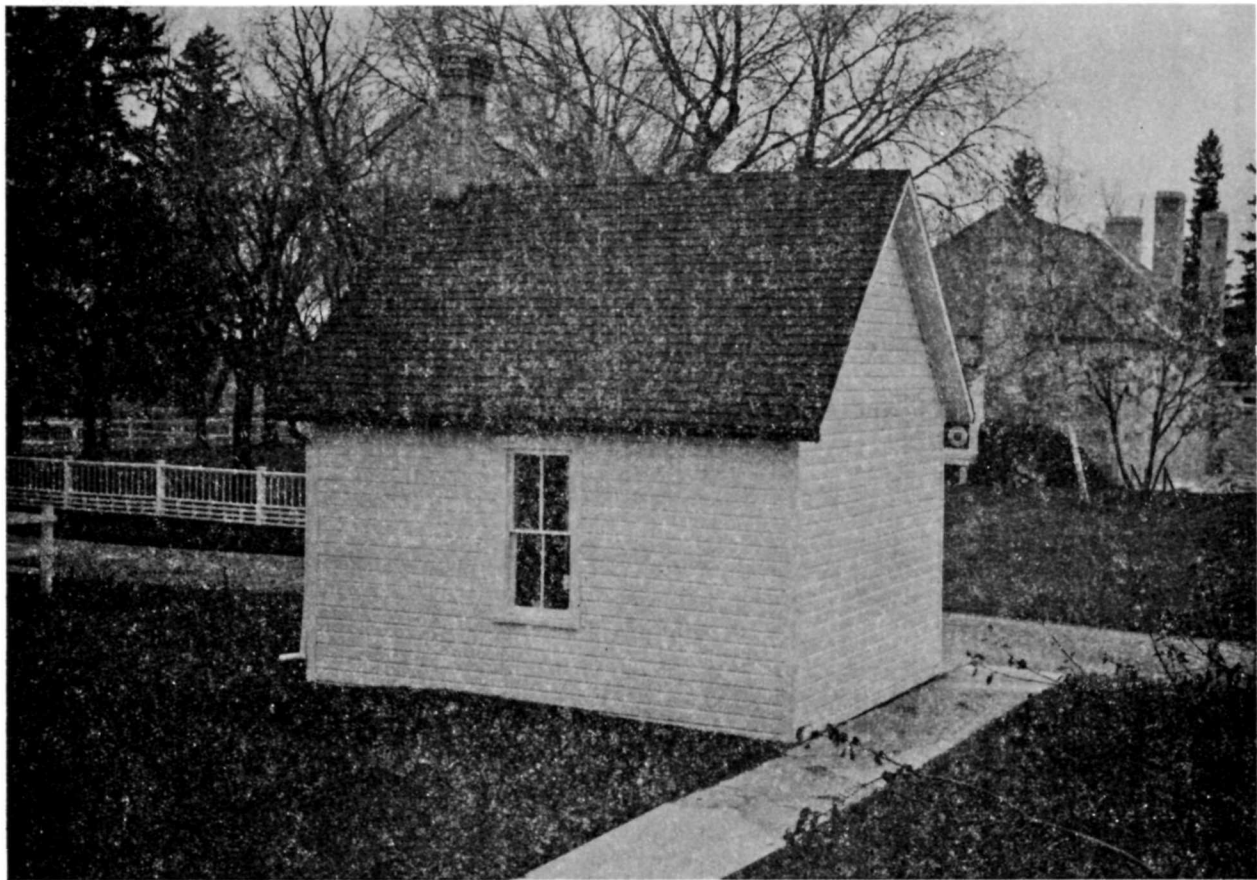
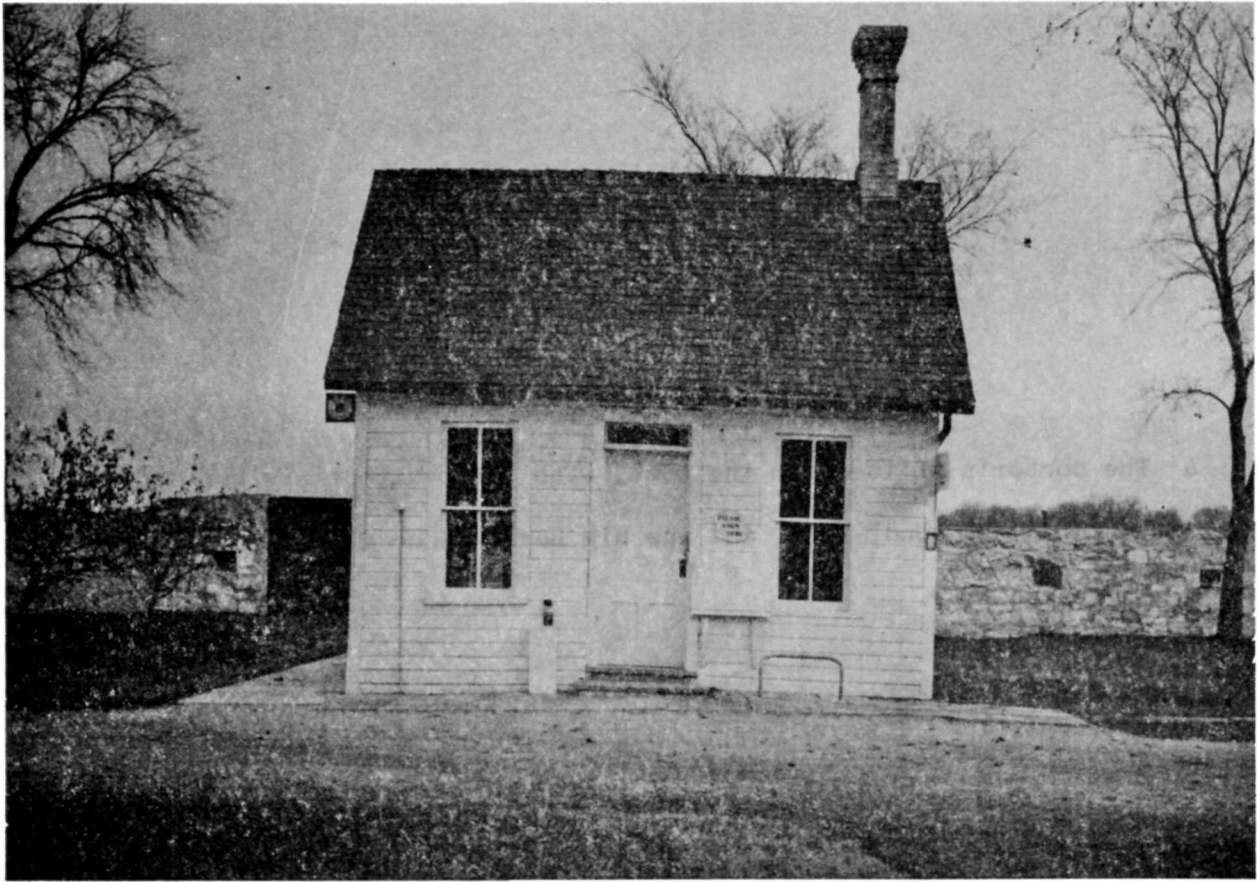
- 1 David Young, M.D., first Superintendent of the Manitoba Asylum, 1885-1912. Young, a native of Sarnia, Canada West, emigrated to Manitoba in 1871 and provided medical services to the North-West Mounted Police Force (1873-74) and to the Manitoba Penitentiary before assuming responsibility for the first lunatic asylum in Manitoba.

(Engraving from Manitoba, Pictorial and Biographical I [Winnipeg, 1913].)



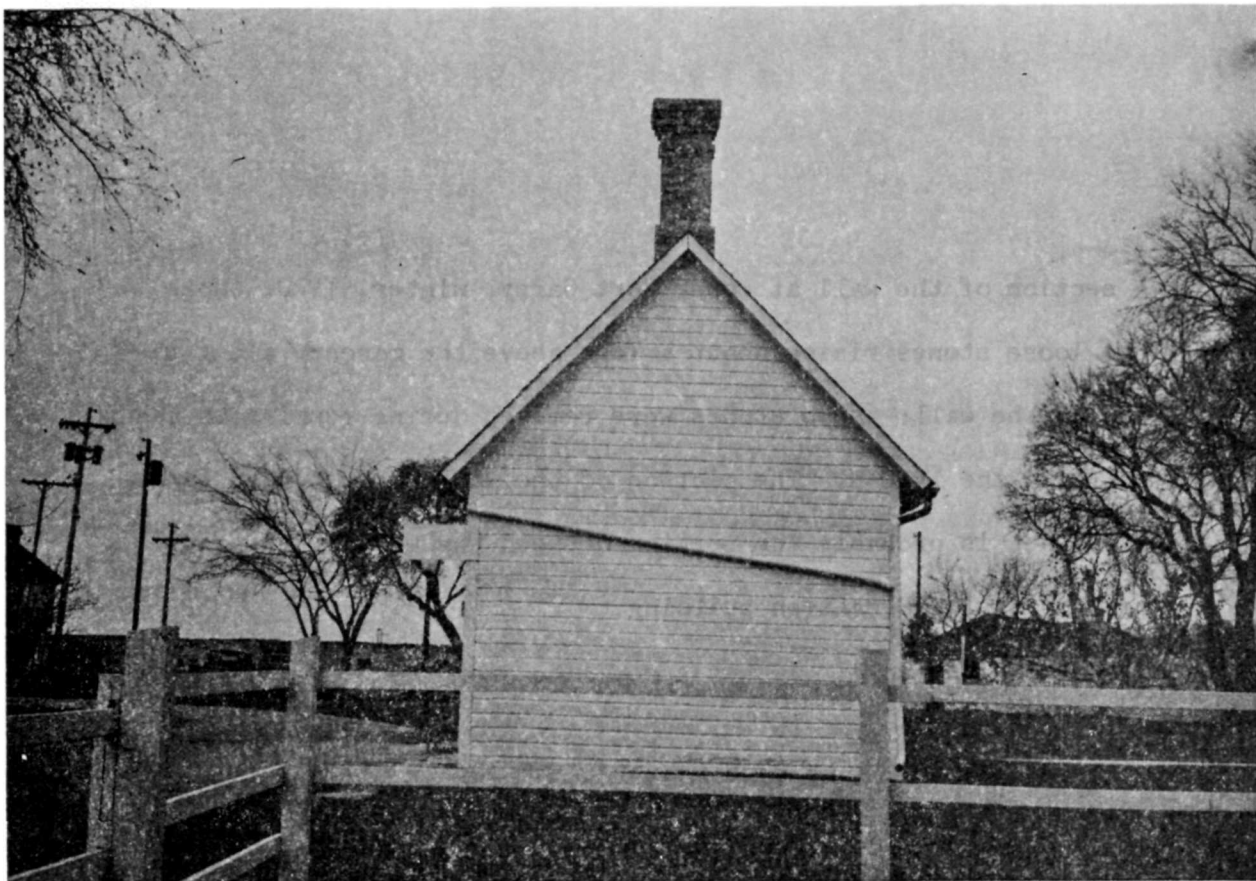
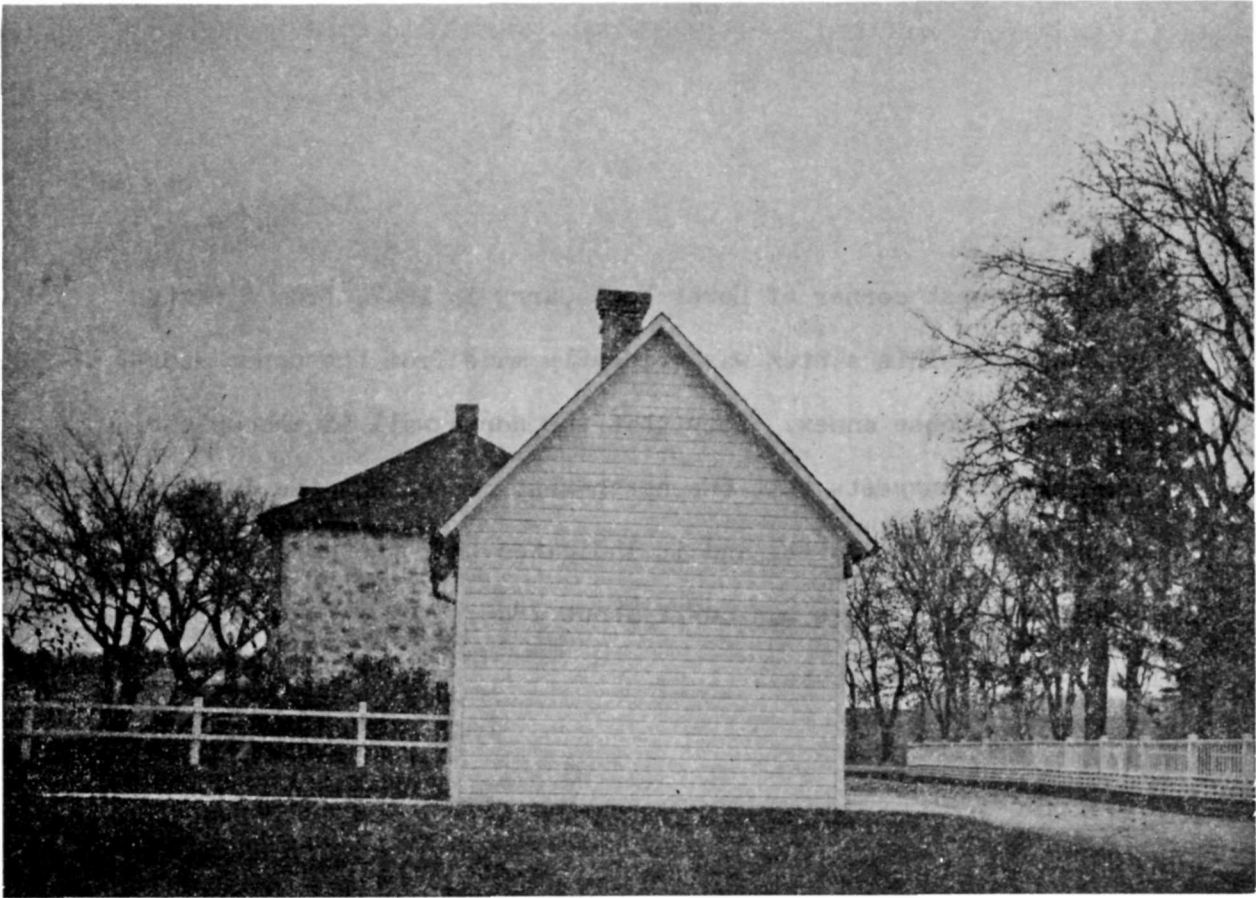
2 View of the doctor's office from the south, November 1969.

3 View of the doctor's office from the top of the north wall,
looking south. November, 1969.



- 4 The doctor's office from the west, with the penitentiary building in the background, left, and the big house fence at right.
November, 1969.

- 5 The doctor's office from the east, showing the NWMP Canteen building at left and the bake-house in the right background.
November, 1969.

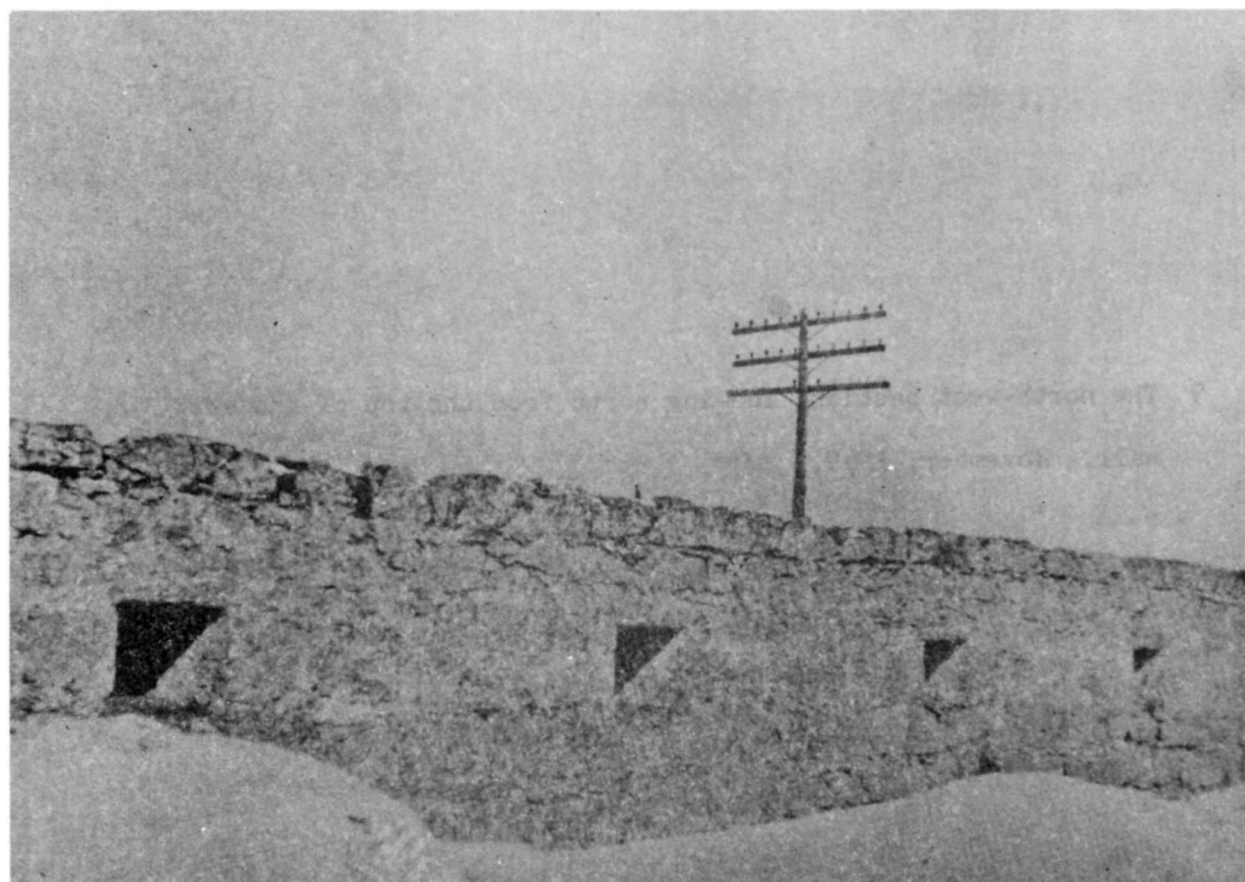
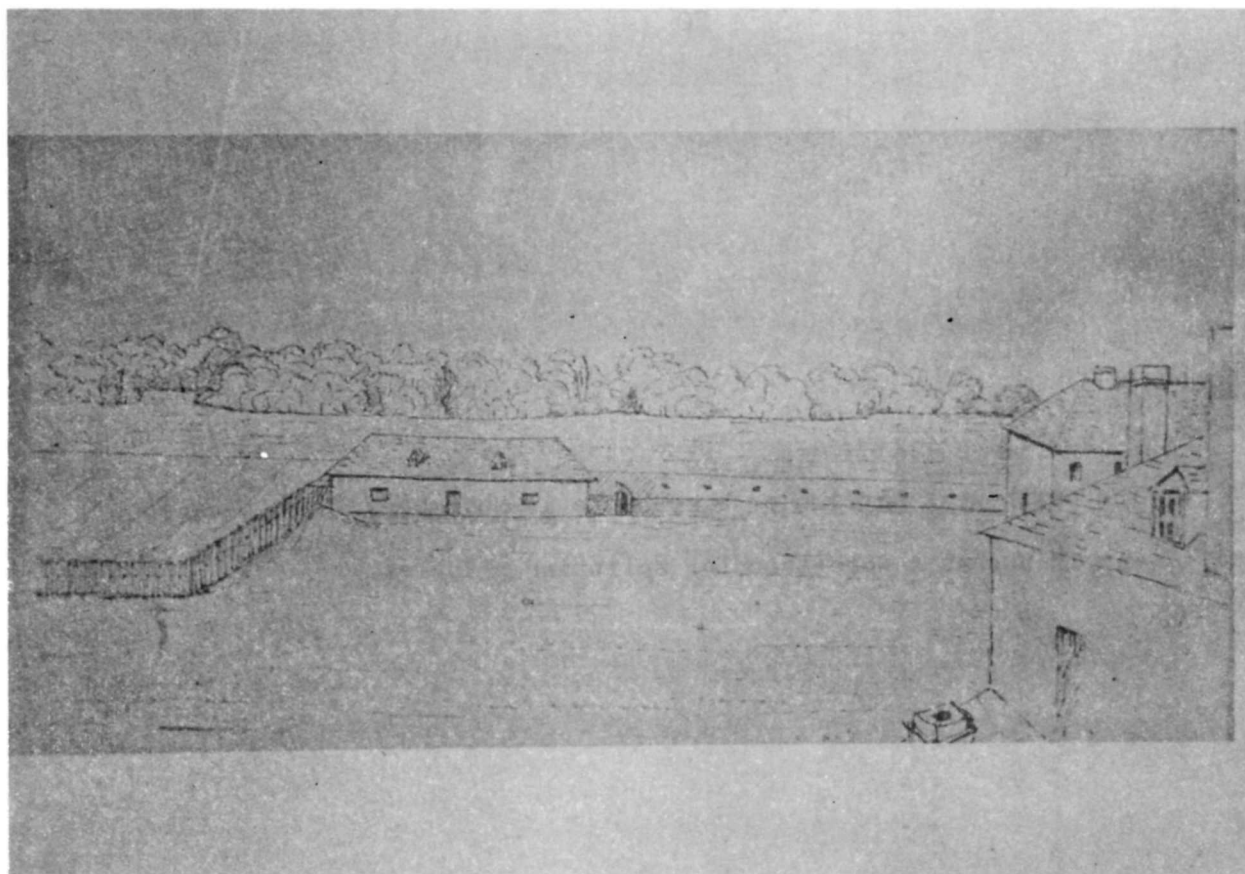


6 The north-west corner of Lower Fort Garry in 1847, from a sketch by Findlay. This sketch was evidently made from the upper storey of the Big House annex. Note that the north wall is incomplete; this sketch suggests that the north-west corner was the last part of the wall to be built, and it indicates that the north-west bastion or bake-house was built about 1848.

(Glenbow-Alberta Institute).

7 A section of the wall at Lower Fort Garry, winter, 1920. Note the loose stones rising about a foot above the masonry along the top of the wall: these stones were removed during repairs to the walls in the 1920's. The section of the wall has not been identified but is probably the portion between the west gate and the rear of the NWMP canteen building.

(Hudson's Bay Company).



8 The north-west bastion or bake-house in November, 1969, when it was in use as a work-shop for splitting shingles.

9 The north-west bastion, looking north from the top of the west wall. November, 1969.

