The Impact of the Spanish Influenza Epidemic on Saskatchewan Farm Families, 1918-1919

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A Tale of the Flu
A flea and a fly had the 'flu
They neither were sure what to do
“Let us fly,” said the flea
“Let us flee,” said the fly
So they flew through a flaw in the flue.¹

1. Introduction

As the First World War raged in Europe, a devastating disease – the so-called “Spanish” influenza – killed between 50 and 100 million people worldwide. At least 50,000 Canadians died from the disease, more than all the battlefield deaths combined.² The flu epidemic started in the trenches in May 1918, spread across the Atlantic as troops returned to Canadian ports in the late spring and early summer, and reached Saskatchewan on October 1, 1918. Infected soldiers bound for home disembarked from troop trains in Regina and from there, the flu spread rapidly throughout the province.³

During the first three months of the epidemic, 3,906 Saskatchewan people died, with the number of deaths peaking in mid-November, 1918 – a result of people coming together for victory celebrations on Armistice Day. The epidemic continued to May 1919 and then gradually subsided. By April 1919, the total number of recorded deaths in Saskatchewan was 4,821 – an average of 688 per month. By 1920, it was calculated that a total of 5,018 people had died in the province as a result of the Spanish Flu.

While the death rate in Saskatchewan’s urban centres was almost double that in rural areas, the largest number of deaths occurred in villages (12.6 people out of 1,000). Most diseases tend to hit the youngest and oldest people the hardest. The greatest number of deaths from the Spanish Flu epidemic of 1918-1919, however, occurred in young adults – people between the ages of 20 and 40 (57.8%). Because influenza was more likely to kill parents than children, there was a sharp rise in the number of orphans in the province.⁴

¹Rhyme in the Canora Advertiser, as quoted in Eileen Pettigrew, The Silent Enemy Canada and the Deadly Flu of 1918 (Saskatoon: Western Producer Prairie Books, 1983), 133.
²The disease was named “Spanish” influenza because, due to Spain’s neutrality during the war, news of the epidemic was not censored as it was in other European countries. Ibid, 5.
⁴The urban death rate was 9.7 per 1,000; the rural death rate was 5.1 per 1,000. Saskatchewan Bureau of Public Health, Annual Report (Regina: 1918-1919), 83-4.
Most deaths occurred on the tenth day of sickness. In the days before penicillin, pneumonia was the main complication and cause of death.\(^5\) Spanish influenza often began like a cold, with sneezing and coughing. Attack was sudden. A report in the February 1919 issue of the *Canadian Medical Association Journal* described a “typical” case of influenza. It began with sudden weakness, pain and chills. Coughing produced “quantities of blood-stained expectoration or nearly pure dark blood ...the face and fingers cyanosed, active delirium came on ... the tongue dry and brown, the whole surface of the body blue, the temperature rapidly fell and the patient died from failure of the respiratory system.”\(^6\)

2. Measures for Care and Prevention

According to Maureen Lux, the Spanish Flu epidemic of 1918-19 set off a crisis in public health in Saskatchewan when neither government nor individuals were able to cope or to control the disease. “When the epidemic struck,” Lux writes, “the federal government passed responsibility to the provincial governments, that then relied on the municipalities, who in turn encouraged all citizens to be vigilant in protecting themselves.”\(^7\) Emergency influenza hospitals were established in churches, schools, hotels, and community halls throughout Saskatchewan. Because of the First World War, there was a shortage of doctors in the province when the epidemic hit. “As of January 1917 there were 788 doctors in Saskatchewan, of whom seventy-four, or nearly ten percent, were on active military service” Lux explains. “Furthermore, those who did care for patients were among the first to fall ill or die from influenza.”\(^8\)

For prevention, the wearing of gauze masks over the nose and mouth was recommended in public places. It was not long, however, before public health authorities realized that masks, unless changed every few hours, provided a perfect medium for bacterial growth.\(^9\) Other preventative measures and “influenza cures” included eucalyptus oil and camphor (to combat the stench), compressed yeast, lemons, and, most popularly, alcohol.

Prohibition had been in effect in Saskatchewan since 1915. Alcohol was available only by doctor’s prescription and only two wholesale druggists in the province were permitted to distribute it. During the 1918-1919 epidemic, many Saskatchewan residents came to see liquor as an absolute necessity. Myrtle Iles recalls that when her father, Delbert Wruth of the Thunder Creed district, fell ill with the flu, the local church minister, Rev. Williams, paid him a visit and asked him if he had any liquor in the house. When her father said that he did, the minister told him “get pouring it into him,” Iles recalls. “Dad said Mr. Williams was the only minister he ever

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\(^5\) Penicillin, discovered until 1929, was not put on the market until 1945.
\(^6\) As quoted in Lux, 4.
\(^7\) Lux, 4.
\(^8\) Ibid, 5.
\(^9\) Ibid, 6.
know who told someone to get drinking.”

Before tending to influenza patients, the doctor at Rouleau, Saskatchewan took a swig of brandy for medicinal purposes. “He advised parents to give their children one teaspoon of brandy in a cup of water each day, adults a mickey of brandy a day to ward off the flu,” the Rouleau and district history book states.

Other Saskatchewan residents relied on home remedies to ward of the Spanish Flu. Teresa [Bishop] Allenby of the Mayfair district writes:

“How we missed betting the flu, I often wonder, with Dad going with the doctor to so many homes that had it. Dr. Scratch told Mother to place plates of sliced onions about the house, remove and burn them in four days, then replace them with fresh onions. If the onions did it or not, we will never know, but we did not get the flu.”

3. Impact on Rural Saskatchewan

In the words of Maureen Lux, rural Saskatchewan was “virtually unarmed” in the fight against the Spanish Flu. “Hospital accommodation was unevenly distributed throughout the province,” she writes. “Although eighty-seven percent of the province’s population lived in the country, only thirty-four percent of the hospital beds were in rural areas.” At one point, in the Kamsack area, the doctors and nurses were so busy with the influenza victims, it was left to the veterinarian to deliver a baby.

Nursing care and bed rest were essential for complete recovery from Spanish influenza. Few Saskatchewan residents, however, had access to hospital care before 1920. In 1913, the community of Lloydminster had pioneered the concept of the union hospital, a joint management scheme in which a town, neighbouring villages and the surrounding rural municipalities shared the costs of operating a hospital. The Union Hospital Act was passed by the provincial legislature in 1917, but when the flu epidemic broke out in 1918, there were only eight Union Hospitals in Saskatchewan. As a result, most farm families in the province were touched by tragedy during that epidemic.

The stories of hardship in the Spanish Flu epidemic are endless. Stories of people trying to feed

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11Rouleau and District History: The Buckle of the Grain Belt (Rouleau and District History Book Committee: 1995), 76.
13Lux, 7.
and water livestock when they should have been in bed; of getting to the barn or well and not being able to get back to the house and dying alone out in the yard. In her book, Eileen Pettigrow tells of a travelling salesman who called at a store at Paradise Hill and found both the proprietor and his wife dead. “Nearby, he found three Indians lying dead, and not far away a young man worked alone to dig graves for his parents and his brother and sister.”

Isolated homesteads were the rule in 1918, and the horror of families dying in cruel circumstances had a devastating impact. In his autobiographical novel, Big Rock Candy Mountain (1938), Wallace Stegner conveys the sense of fear and isolation experienced by farm families during the flu epidemic:

Suppose a whole family got sick with this flu, and no help around, and winter setting in solid and cold three weeks early? It was supposing things like this that drove in the homesteaders in wagons piled with goods, to settle down on some relative or friend or vacant rooms. Three families had gone together and cobbled up a shack, half house and half tent, in the curve of the willows east of the elevator. Even a tent in town was better, in these times, than a house out on the bitter flats.

During the flu epidemic of 1918, harvesting was still going on, but the operations ceased because of illness of the crews. There are stories of entire threshing crews — many of them men from the East who had come west on harvest excursions — found dead as a result of the flu. At Strongfield it was reported that in one nine-man threshing crew (all transients), seven of the men died in a bunk car. Aimee Hill recalls that when the Methodist Church at Hawarden was turned into a hospital, her mother offered her services as a practical nurse. “I recall her telling of her experiences at that time, when men, sometimes name and home unknown, lay dying alone among strangers” Hill writes. “I remember seeing three coffins, piled one on top of the other, sitting outside of the church awaiting burial in a common grave.”

There were few funerals, only burials. Dead bodies were literally stacked up, and municipal by-laws requiring burial permits were often overlooked. So many died in the Rouleau area that the undertaker had a difficult time getting enough coffins built in time for burial. Grave diggers were at work around the clock. Torgerson’s garage in Hawarden became an undertaker’s establishment for a while. Farmers made caskets. Others dug graves, and still others manned

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16Pettigrew, 62.
17Wallace Stegner, Big Rock Candy Mountain (New York: Duell, Sloan and Pearce, 1938), 235.
18Lorraine Blashill, Homestead Heritage; The Story of Strongfield (n.d. [1976]), 76.
19Aimee Hill, “Edsel Clement Vicary,” in Hawarden Heritage (Hawarden and District History Book Committee, 1980), 373.
20Rouleau and District History, 76.
make-shift trucks to take the bodies to the cemetery for burial. Some Saskatchewan families lost track of their loved ones forever due to a provincial Order-in-Council which forbade the transport of bodies either within, or outside, the province. As a result, bodies were buried as quickly as possible in the nearest cemetery.

The regulations to prevent the transport of bodies of flu victims were part of a large effort to curtail the spread of the disease. Towns and villages throughout Saskatchewan attempted to quarantine themselves from the rest of the world, giving notice to the railway companies that no passengers would be allowed to stop. “At Lloydminster and North Battleford the roads were patrolled to prevent travel,” Lux informs us. “In Tisdale the village council passed a resolution at the emergency influenza meeting asking all country residents to leave town as soon as possible after transacting their business.”

4. Impact on Saskatchewan’s Health Care System

The Spanish Flu epidemic of 1918-1919 stimulated several important changes in the delivery of health care services in Saskatchewan. The provision of free services from municipal doctors that had been introduced in 1916, was formalized by the provincial government in 1919 with the amendment of the Rural Municipality Act. The municipal doctor system empowered rural municipalities to increase doctors’ annual salaries from $1,500 to $5,000. The shortage of hospital facilities was addressed in a 1919 amendment to the Union Hospital Act which removed obstacles to organizing more union hospitals. Perhaps most importantly, given the isolation of farm families, the Bureau of Public Health introduced courses on home care of the sick and child care in the early 1920s for farm women. “When sickness enters the home,” the Bureau explained, “only those living on an isolated prairie homestead far removed from medical aid, with limited transportation and communication facilities, realize their helplessness.”

5. Saskatchewan Stories

The following are accounts of three Saskatchewan farm families who were hit hard by the influenza epidemic of 1918:

When Dora Fisher’s father and mother were both bedridden from flu, Dora and her sister had to do the farm chores. The two little girls drove the team to the well, brought home water in two barrels on the sleigh, took the cattle for a drink water, fed the animals, milked the cows, and occasionally put coal on the fire. Eventually, a neighbour arrived and offered to help with the chores until their father recovered. Dora recalls:

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21Blashill, 76.
22Lux, 9.
Our doctor lived 20 miles away. He kept two teams ready to take him to calls; one team rested while the other worked. At one time, the doctor had a driver to do the driving for him while he got as much sleep as possible on the way to calls. Eventually he also became ill with the disease. ... Dad and little brother soon recovered, but Mother remained ill for some time and did not return to good health and strength for a few months. She was left with a hearing loss, which soon became almost total deafness, a severe handicap for a mother of young children.24

Sister Mary Cecil (Prudence Roddy) of Rouleau lost her father, Martin P. Roddy; her mother, Julia Roddy, and one of her four siblings, Beth Roddy, as a result of the Spanish Flu. The following is her account of her family’s experience during the epidemic:

The evening of Friday, October 18, 1918, was a day of days. Daddy came home from town rather late, bringing with him a present for Mamma’s birthday, October 19. She would be 34 on that day. The present was a Victrola, a handsome piece of furniture and we children were beside ourselves with joy. ... The next morning, Saturday, Daddy went to town to get a hair cut and shave. When he came back at dinner time he said that he wasn’t feeling well, and he remarked that the barber, Mr. Hisey, had said that he, too, wasn’t feeling well. After dinner Daddy went to bed. ... The next day, Sunday, October 20, after dinner we three girls, Beth, Agnes and I, went to talk to Daddy. He spoke to us in what, in memory, seemed like last words, telling us to pray for him. We went to another room, knelt by the bed, prayed and cried.

Monday, October 21, we didn’t go to school, all schools were closed. The day was spent playing in the straw stacks; by evening Beth was feeling sick. The next evening, Tuesday, I began to feel sick, I sat in front of the kitchen stove shivering. Later I went to bed and didn’t get up the next day. I don’t remember when Mamma went to bed... . Cecil, Agnes and Jeanne did not get the flu.

Other memories include Daddy getting out of bed to water the horses because the hired man was sick; Cecil, aged nine, drove the car into town to replenish the supply of baby biscuits for Jeanne; ... Mrs. C.L. Tutt came everyday and before going home she washed and fumigated her clothing so as not to spread the germs of the dread disease... . Sunday, October 27, I remember being carried from my bed to the room where Daddy was, but I do not remember seeing Daddy. The Hartney uncles were with us and called for a priest. Father Benoit, Wilcox, our parish priest was sick with the flu; Father O’Hare, Regina, came to give Daddy and Beth, who was also dangerously ill, the sacraments of Last Anointing and Holy Communion. Daddy died early on Monday morning, October 28. Cecil was sleeping downstairs in the parlour, and he said afterwards that he had seen the men carrying a big box down the stairs. There were no funerals, the dead were simply

24Dora Fisher, “Coping with Spanish ‘Flu; Germs from War-Ravaged Europe,” in Folklore (Vol. 11, No. 4, Autumn 1990), 5-6.
buried.

Beth died Tuesday evening, October 29, and Mamma died on Wednesday morning, October 30. Father Benoit came to give her the Last Sacraments. Mamma said to him: “You will help Martin to bring up the children?” Father promised he would, although it was not Martin whom he would help. Mother must have been surprised when she met Daddy and Beth already in heaven before her.25

Jean (Haroldson) Hunter describes how, on March 10, 1919, her father, Albert Haroldson, met his wife, Julia, and three of their children at the train in Gull Lake, who were coming home from visit to their grandmother’s in North Dakota. Their trunk didn’t come, so Jean’s father had to make the long trip back to the railway station by bobsleigh the next day. She writes:

On his return home the next day, he became so ill that he tied the horses to the sleigh and they found their own way home. Almost all at once we were all in bed with influenza. Mother must have come home with it, and was in bed for a long time. Lawrence, about thirteen years of age, got up and walked to Chris Kirk’s for help. The doctor was called, and Mrs. Walter Ross, who was a nurse, came and cared for us, but five days later our father passed away. This was a terrible time for Mother to be left alone with seven children under 16 and the new baby only a few days over one month old.26

25 Rouleau and District History, 76.
Bibliography


*Spinning Stories: A Woven History; Kamsack, Togo, Veregin, Runnymede, Cote* (Kamsack: Kamsack History Book Committee, 1988).