Lebret Community Profile: A Journey through Time





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INTRODUCTION

This report highlights the findings from a study entitled, "The Origins and Import of Health Inequities in Saskatchewan 1905-1985." The study was conducted by the Saskatchewan Population Health and Evaluation Research Unit (SPHERU), an interdisciplinary research unit committed to critical population health research.

Guided by a population health approach (Public Health Agency of Canada, 2011), this report examines the historical origins of health within the rural community of Lebret, Saskatchewan. Health is influenced by several factors including socioeconomic status, social support, physical environment, access to services, healthy child development, health practices and coping skills, gender, culture (PHAC, 2011). Accordingly, we suggest that in order to address the origins of health it is important to examine factors such as infrastructure, socio-demographics and government policy.



Image credit: Saskatchewanderer. (2011.). Lebrert, SK: Gov. of Saskatchewan.

WHY STUDY HISTORY?

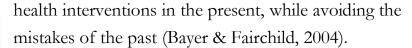
History provides a powerful tool for addressing the origins of health and understanding the health concerns of the present (Fee & Brown, 1997; Hackett, 2005). A historical approach reveals that many of the health concerns in Saskatchewan are longstanding, some as old as the province itself. Health issues are experienced disproportionately among different populations and are often connected to

socioeconomic position, ethnicity, and geography.

Across Canada, rural and urban populations may have similar levels of health; however, they face different sets of issues (Martinez, Pampalon, Hamel, & Raymond, 2004). Saskatchewan's rural residents may experience limited access to quality health care, as well as increased risk of disease due to exposure to farming chemicals or moldy hay, mechanical injury and growing levels of stress (Jennissen, 1992).

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The potential benefits of studying the origins of health are considerable. The past exists as a natural data bank which allows us to examine both the forces that caused health inequities and the success of the interventions created to address them (Fee & Brown, 1997). As such, historical knowledge enables us to design effective population





WHAT WE DID

This study is closely linked to SPHERU's *Analysis of historical interventions in rural communities* (Daschuk & Hackett, 2011) project, with a specific focus on the village of Lebret, Saskatchewan. As such, qualitative data (including government documents, community-based organization archives, newspaper stories, and local histories) was used to examine and review historical factors at the community level. In addition, digital photos, scans of archival documents, and quantitative data from early Public Health

Reports were compiled to understand changes in health over the twentieth century. This report focuses on the data findings on the rural community of Lebret, SK.

GEOGRAPHIC OVERVIEW OF LEBRET

- Located on the northeast shore of Mission Lake
- 6 km east of Fort Qu'Appelle on highway 56
- Present land area = 1.31 km²
- Included in the Regina Qu'Appelle Health Region (RQHR)
- 50°45'16" N, 103°41'54" W
- Rural municipality #187 North Qu'Appelle
- Residence code = 187 53

LEBRET: EARLY SETTLEMENT

This following discussion highlights some of the key factors that contributed to the development of the Lebret community.



Bishop Taché first visited Lebret on 26 August 1864. He established "The Mission" in October of 1865.

- In 1819, Abbe Provencher visited the area that would become Lebret for the first recorded time in history (Town of Fort Qu'Appelle, n.d.).
- In 1864, Bishop Alexandre Tache travelled through the valley and identified the area as an excellent location for a catholic mission (McLennan, 2006).
- In October of 1865, Bishop Tache returned to the valley, lodging in Fort Qu'Appelle for four weeks, while providing ministry services to residents of the area. During his stay, he officially chose this site as the location for 'La Mission' (Town of Fort Qu'Appelle, n.d.).



Fr. Richtot, O.M.L., was sent by Taché in 1866. He built the first chapel-residence that year.

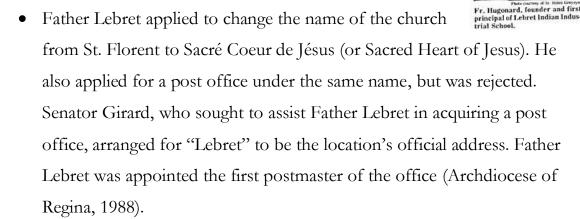
• In spring of 1866, Abbe Ritchot, of St. Norbert, Manitoba, was sent to begin La Mission. Acting as the first priest in charge (1866-1867), he built a house chapel made of poplar logs (Archdiocese of Regina, 1988). The church was destroyed by fire in 1869 and rebuilt for a second time in 1870 (Town of Fort Qu'Appelle, n.d.). This location served as part of a larger mission, titled the 'St. Laurent Mission', which had 32 posts in Manitoba, Saskatchewan and Alberta (Brecht, 2007).



Rev. Jules DeCorby, O.M.I., became the first resident priest in 1868. He remained until 1880.

• Father Jules Decorby, an Oblate missionary, arrived in 1868 and acted as a resident pastor for 500 families in the area. In 1871, he erected a cross on the hill to honor the location where Bishop Tache had entered the valley (Town of Fort Qu'Appelle, n.d.). "The

- Mission" became a place where missionaries travelled to serve and individuals sought religious and educational attainment (McLennan, 2006).
- In 1880, Father J. Hugonard succeeded Father Decorby as resident pastor (Town of Fort Qu'Appelle, n.d.).
- In 1884, when Father Hugonard became principal of the Qu'Appelle Industrial School, Father Louis Lebret succeeded his position as parish priest.



- Although Father Lebret only served for a brief time period, the name of La Mission was formally changed to Lebret in 1885 in honor of the parish priest (McLennan, 2006).
- In 1899, the Sisters of Our Lady of The Missions arrived in Lebret and later founded the Saint Gabriel convent where they taught until 1974, when the convent was closed (McLennan, 2006).

PROSPERITY: THE BUSTLING YEARS

- 1911 marked a monumental year for the village of Lebret when the first train travelled through the community. That same year, the Village of Lebret was officially incorporated (Lebret History Book Committee, 1971).
- In 1925, a spacious gothic style church was built of fieldstone on the northeast shore of Mission Lake. The church replaced the humble, log chapel that was formerly used by residents. The church, called the Sacred Heart of Jesus, was the inspiration for the miniature chapel shrine and fourteen landmark stations of the cross that were erected on the hill in 1929 (McLennan, 2006). The fourteen stations of the cross were built to symbolize the "arduous journey of Jesus to the site of crucifixion at calvary" (Nilson, 39, 1998). The church was designed by Brother de Byle and was built at a cost of \$38,000 (Archdiocese of Regina, 1988).
- The village of Lebret's population peaked in 1956, totaling 335 residents (Statistics Canada, 1956).
- In 1959, the last passenger train travelled through the village of Lebret (Lebret History Book Committee, 1971).
- In 1967, Lebret celebrated its centennial of 100 years having a parish with a resident pastor (Archdiocese of Regina, 1988).



The present fieldstone church in Lebret was built in 1925. This Gothic-style church is a beautiful and imposing landmark.

SCHOOL HISTORY:

- In 1884, the same year as the Indian Act, which stated that the Government was assigned responsibility for providing Aboriginal peoples with education and integration into Canadian society (Miller, 2012), Father Hugonard built the first residential school in the west. The school was financed by the Dominion Government of the Day and sought to provide training for Indian boys and girls. The school was titled the "Qu'Appelle Industrial School" and enrolled 15 children in its first year (Town of Fort Qu'Appelle, n.d.). Under Hugonard's principalship, the Grey Nuns of Montreal arrived and taught at the school until 1975 (Brecht, 2007).
- In 1913, the Lebret Public School was built (Lebret History Book Committee, 1971).
- In 1923, the Lebret High School was opened and remained open until its amalgamation with Qu'Appelle High School in 1966 (Lebret History Book Committee, 1971).
- In 1926, the Seminary of the Oblate Fathers was constructed on the south side of Mission Lake. The seminary functioned as a "University Centre" of learning and served to educate both residents and visitors from other locations (Lebret History Book Committee, 1971).
- In 1932, the Qu'Appelle Industrial School was destroyed by fire (Lebret History Book Committee,).
- The Indian Residential School was built in 1935 to replace the Industrial School.
 Several additions were constructed in later years, consisting of a large gymnasium,
 classroom block sections and a secondary section in 1951, known as St. Paul's

- High. Within the high school, courses were taught and accredited by the Department of Education (Lebret History Book Committee, 1971).
- Due to a lack of candidates, the Lebret Seminary (or "Scholasticate") closed in the 1960s (Nilson, 1998).
- In October 1973, Lebret's residential school was signed over to a First Nations school board and renamed "White Calf Collegiate". The school remained open until 1998 (McLennan, 2006).



Image credit: Industrial School, Qu'Appelle Valley, Saskatchewan, Canada. (n.d.). People Places: Bill Barry.

LEBRET FARM

- In 1936, Father Boutin organized a Metis Club (Archdiocese of Regina, 1988).
- In 1941, Father Duplain constructed a Metis farm, where eight houses were built. The land was used for agriculture and employed many of Lebret's Metis residents (Archdiocese of Regina, 1988).
- Between the 1930s and 1950s, government officials sought to rehabilitate
 Saskatchewan's Metis population through training and employment with hopes to amend increased poverty rates (Prefontaine, 2006).
- In 1945, under CCF leadership, the government purchased Lebret's Metis farm, which had been previously been under the direction of Oblate Fathers (Prefontaine, 2006).
- Disagreements over control of the farms between government officials and the church, soon because a source of tension (Prefontaine, 2006).
- In 1953, Father Blanchard organized a cooperative movement, whereby both the church and government had a role in the production of the farms, however the disagreements never fully distinguished and the farm never again gained the

degree of success and productivity it had prior to the transfer (Prefontaine, 2006). The farm officially closed in the late seventies (Archdiocese of Regina, 1988).



COMMUNITY INFRASTRUCTURE

Electricity, Gas & Water Supply (Lebret History Book Committee, 1971)

- In 1928, Lebret was equipped with its first set of electric lights.
- By 1930, the Village was entirely powered with electric lights, including the landmark cross on the hill, which was wired and illuminated.
- In 1962, natural gas was introduced to the Village.
- During 1963, all waterworks were completed throughout Lebret.

Transportation

- In 1913, there were two passenger trains daily from Winnipeg to Edmonton (Watrous History Book Society, 50)
- Transportation systems played a key role in transmission of illness. In 1962, a Government of Saskatchewan news release identified concerns of smallpox exposure on a passenger train:
 - o "In the western provinces, persons who traveled on the C.N.R. Supercontinental which left Toronto on August 14th have been asked to come forward for vaccination."



COMMUNITY-BASED ORGANIZATIONS (CBOS)

- In 2004, Saskatchewan had an estimated 8,000 community based organizations, making it the second highest national rate of voluntary organizations per 100,000 residents (DeSantis, 2006).
- In 1967, the Sacred Heart Church was Lebret's only Registered Charity. Since the beginning of the churches operation, dating back to the late 1800s, the church has provided educational and religious services to residents of the area (Canada Revenue Agency, 2012).
- By 1987, two more charities had registered in Lebret. These included the Flaman Morris Home Inc. and the Lebret History Book Committee Inc. (Canada Revenue Agency, 2012).
 - o Flaman-Morris Home is a holistic healing center which reserves 12 beds and employs a staff of 8 to treat health issues using nutrition for the body, mind and spirit (Saul, 2006).
 - o The Lebret History Book Committee operates the Lebret Museum as well as publishes local histories about Lebret and its surrounding area (Canada Revenue Agency, 2012).
- By 2001, the Lebret Farm Land Foundation Inc. had joined the ranks of Lebret's registered non-profit corporations. The Lebret Farm Land Foundation consists of Metis and Non-Status Indian members who reside in the southeastern area of Saskatchewan. The Provincial Lands Act has outlined that the sale of certain lands be authorized to sell for \$1 to the Lebret Farm Land Foundation Inc (Saskatchewan Regulations, 1986).
 - o The Métis Farm in Lebret was turned over to The Lebret Farm Land Foundation Inc. in 1987.

DISEASE & EPIDMIC OUTBREAKS

- **Tuberculosis** leading cause of death in Canada between 1877 and 1927, surpassed only by cancer thereafter. In 1917, the Fort Qu'Appelle Sanatorium opened to treat tuberculosis patients. At its peak, in 1930, the Sanatorium treated 1905 patients with 1134 patients being treated for tuberculosis (Houston, 2002).
- 1918-1919 Spanish Influenza- more Saskatchewan fatalities than were killed during World War I. The flu affected many; including whole families and soldiers who had survived the war. Some died within 24 hours (MacKenzie, 2002).

Mortality in RM 187:

- Tuberculosis between 1925 & 1929: 37 deaths
- Heart Disease between 1940 & 1944: 31 deaths
- Cancer between 1940 & 1944: 18 deaths

Morbidity in Lebret:

- Scarlet Fever in 1922: 3 cases
- Scarlet Fever in 1940: 5 cases
- Chicken Pox in 1939: Lebret 27 cases
- **Measles in 1935:** Lebret 153 cases



HEALTHCARE: LEBRET & AREA

- During the height of a tuberculosis epidemic that swept Saskatchewan lands, an institution was built near Lebret to house the growing number of residents who
 - contracted the disease. Located only 10 kms away and spanning 230 acres of land, the Fort Qu'Appelle Sanatorium offered care to patients with tuberculosis. The sanatorium opened in 1917 with only 75 beds but expanded to house 358 patients at its peak (Houston, 2002).
 - The institution was designed to function self-sufficiently; equipped with its own power house, stables, poultry ranch and garden. The sanatorium remained open until the 1960s when infection rates had decreased to the level of the facilities no longer



Image credit: Mendel Art Gallery. (2007).

- being necessary. The decreased rates were largely due to efforts by the Anti-Tuberculosis League, which was formed to combat the quickly spreading infection (Mendel Art Gallery, 2007).
- In 1930, near Lebret, the Fort Qu'Appelle Indian Hospital was constructed as a 50 bed tuberculosis treatment center. The center was eventually expanded to serve as a public hospital for residents of the Qu'Appelle region. The hospital was renovated in the 1950's to accommodate the growing number of residents in the area (Parks Canada, n.d.).
- Presently, Lebret is located within the boundaries of the Regina Qu'Appelle
 Health Region, which is responsible for delivery of health related services.
 Although RQHR does not operate hospital care facilities directly in Lebret, in
 Fort Qu'Appelle, only 5 km away, there is the All Nations' Healing Hospital,
 which provides emergency, acute, palliative, laboratory and radiology services, as

well as the Echo Lodge Special Care Home, which provides long term care to 50 permanent residents (RQHR, n.d.).

EARLY HEALTHCARE: SASKATCHEWAN

- In 1906, the Saskatchewan Medical Association was established (Houston, 2002).
- In 1916, Saskatchewan passed the Municipal Hospital Act which allowed for union hospital districts (Health Canada, 2011).
- In 1919, the Municipal Doctor Plan legislation permitted rural municipalities to employ a physician on a salary basis (Houston, 2002).
- In 1946, Swift Current introduced public health with prepaid universal medical care (Houston, 2002).
- In 1947, Saskatchewan created a province-wide, universal hospital care plan (Health Canada, 2011).
- In 1959, Premier T.C. Douglas introduced his prepaid medical—care program (Badgley & Wolfe, 1967).
- In 1962, Saskatchewan was the first province in North America to implement universal Medicare (Health Canada, 2011).
- In 1962, Saskatchewan developed medical insurance plan for physicians' services, and in 1962 Saskatchewan doctors went on strike for 23 days (Badgley & Wolfe, 1967).
- In 1968, Saskatchewan developed medical insurance with federal cost sharing (Health Canada, 2011).

DISCUSSION

- While access to healthcare is often recognized as the primary factor in rural health, health in rural communities is much more complex and multifaceted.
 Health in Lebret, Saskatchewan has been influenced by various events such as government policies, programs, infrastructure and socio-demographics.
- There are three main benefits to studying health within a historical context (Hackett, 2005):
 - First, it enables us to learn about the impact of health changes on populations in the past.
 - Second, it allows us to better understand the origins of present day health issues, as many are rooted in the past.
 - Third, it provides insight into the nature of the disease process, and the diseases themselves, by employing the past as a laboratory.
- This research is part of a larger study, funded by the Saskatchewan Health
 Research Foundation (SHRF), where we are collecting information to understand
 the impact of past interventions such as policies and programs on health
 outcomes.
- Studying the impact of past interventions allows us to identify the underlying origins of current health issues. This study will provide a foundation for assessing selected health interventions in Saskatchewan and beyond.

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