



AN ABSTRACT OF THE THESIS OF

Susan Margaret Mayer for the Master of Arts Degree

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Four Pacific Northwest Reservations and the Influenza Pandemic From 1918 to 1919

Abstract

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Over the years, a myriad of diseases have decimated the Native American population in the Pacific Northwest. The last epidemic that affected these Pacific Northwest tribal communities was the Spanish Influenza which dates from the first wave in 1918 to the third wave in 1919. According to statistics, nine of the largest reservations showed an increase of “249 deaths over births” during that year.

This thesis focuses on the Spanish Influenza and its affects on four tribal reservations located in the Pacific Northwest, Spokane, Nez Perce, Colville, and Yakama. In addition, this thesis will study the local social and cultural issues that affect the overall health and mental state of these reservations.

Due to poor documentation and cultural bias, it was difficult to determine the exact mortality rate and effects of the pandemic on these four reservations. Evidence indicates that the Bureau of Indian Affairs was soon overwhelmed by the pandemic. According to Bureau of Indian Affairs, the 4,208 Native Americans in Idaho suffered a mortality rate of 11 percent. Washington’s 10,315 Native Americans encountered a 9 percent mortality rate.

This thesis also addresses the environmental conditions, which enabled influenza and other diseases to spread so quickly. After the consolidation and removal of tribes to reservations, tribal members developed an immune deficiency due to poor living conditions, lack of healthcare, and poor diet. Many Native Americans also developed depression and mental anxiety. This situation was further exacerbated by the visible attacks of government reform policies and allotment and selling of tribal lands.

Four Pacific Northwest Reservations and the Influenza Pandemic

From 1918 to 1919

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A Thesis

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Susan Margaret Mayer

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Approved by the Department Chair

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Committee Member

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Committee Member

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Committee Chair

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Dean of the Graduate School and  
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## Introduction

Since their first encounter with whites, Native Americans have been plagued with various diseases. Their populations, especially in the Pacific Northwest, began to decrease.<sup>1</sup> The last major epidemic to affect the Native Americans was the Spanish Influenza, dated from the first wave in 1918 to the third wave in 1919. Robert Boyd, in his essay, “Demographic History of the 1990’s,” wrote, “The last great epidemic was the Spanish influenza in late 1918... In the United States, there were 75 deaths at Colville, 46 at Yakima, in addition to large numbers at Nez Perce and Klamath reservations. Vital statistics from the nine largest reservations show an excess of 249 deaths over births for the year.”<sup>2</sup>

This thesis focuses on the Spanish Influenza and its effects on four tribal reservations located in the Pacific Northwest, Spokane, Nez Perce, Colville, and Yakama. I will assess the local social and cultural issues that affected the overall health and mental state of these four reservations.

According to Alfred Crosby, European traders introduced infectious diseases, which decimated Native Americans populations during the sixteenth and seventeenth century. These Native Americans found they had no immunity to smallpox, measles, and yellow fever.<sup>3</sup> By the nineteenth century, smallpox and influenza decimated the Native

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<sup>1</sup> Clifford E. Trafzer, *Death Stalks the Yakama : Epidemiological Transitions and Mortality of the Yakama Indian Reservation, 1888-1964* (East Lansing, MI: Michigan State University Press, 1997) 43.

<sup>2</sup> Robert Boyd, “Demographic History until 1990.” *Handbook of North American Indians: Plateau V. 12* (Washington, D,C: Smithsonian Institute,1998) 478.

<sup>3</sup> Alfred W. Crosby, “Virgin Soil Epidemics as a Factor in the Aboriginal Depopulation in America.” *The William and Mary Quarterly, Third Series* 33, no. 2 (1976) 289.

American population. Other diseases soon followed including tuberculosis, trachoma, and gastrointestinal disorders.<sup>4</sup>

Research for this thesis, was unable to conclusively demonstrate that members of tribes in the Pacific Northwest were more susceptible than whites to the influenza of 1918 – 1919. In 1919, the Office of Indian Affairs provided statistical information on the disease based on state and geographical location. For example, the 4,208 Native Americans living on Idaho reservations suffered a fatality rate of 11 percent, whereas in Washington, the 10,315 tribal members had a mortality rate of 9 percent.<sup>5</sup> These mortality rates were marginally higher for the local Native Americans than the surrounding white population, which was 1 percent.<sup>6</sup>

By the late nineteenth century, the tribes were removed to areas, which were selected for them by the federal government. The government, however, failed to keep their numerous treaty promises wherein tribal groups acceded to their removal to reservations in exchange for certain rights and concessions. Once tribes had been removed, they lost their fishing and traveling rights, which were granted by the treaties. In 1887, reservation lands were divided into individual allotments according to the Dawes Act. These assigned lots of 160 acres were distributed to tribal members and heads of households. The remaining tribal land was sold to whites. Using legislation and educational reforms, the federal government, through their overall reservation system policies, sought to assimilate Native Americans into 1890s western civilization.<sup>7</sup> As a result, this forced oppression began to affect Native Americans' overall mental and

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<sup>4</sup> Trafzer, *Death Stalks the Yakama*. 3.

<sup>5</sup> "Influenza Among American Indians." *Public Health Reports (1889- 1940)* 34, no.19 (1919) 1008.

<sup>6</sup> Riley Moffat, *Population of Western U.S. Cities and towns, 1850 -1990* (Lanham, MD: Scarecrow Press 1996) 95.

<sup>7</sup> Trafzer, *Death Stalks the Yakama*. 74-75.

physical health. Native Americans began developing immune deficiencies due to inadequate diet, poor health care and lack of sanitation and facilities. Government housing allotted for two roomed shacks lacked privies and running water. Traditional tribal diet of roots and fish was replaced with government rations, which were high in starch, wheat and lard.<sup>8</sup> According to the Meriam Report of 1928, promised governmental health care was poorly funded. In addition, the few contracted medical personnel were poorly trained and received low wages. Hospitals maintained by reservations were generally “lacking in personnel, equipment, management, and design.”<sup>9</sup>

White society appeared to be indifferent to the Native Americans’ plight. What were the sources of the indifference? Along with cultural and communication barriers, a distrust grew between the dominant white society and Native Americans. Traditional tribal society was perceived as a subculture by the white populace. Tribal members also were perceived as Wards of the State who were “uneducated” and “superstitious.”<sup>10</sup> In 1928, in a Public Health Report, M.C. Guthrie, Chief Medical Director of the Bureau of Indian Affairs, reported that “In such communities, when an Indian has transgressed local laws, is hungry, or is diseased and, accordingly, may be in need of medical assistance and possibly hospitalization, the local viewpoint invariably is that, because he is an Indian, he is, per se, a Government ward and, therefore, a Government responsibility, and the Government must provide the remedy needed, whether it be correctional measures for violation of law, food for the hungry, or the services of a physician and nurse for the

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<sup>8</sup> Ibid, 85.

<sup>9</sup> The Institute for Government Research, *The Problem of the Indian Administration*. 9.

<sup>10</sup> *Our Spirits Don't Speak English: Indian Boarding School*. Dir. Chip Richie. Riche-Heape Films, 2009. DVD.

sick, and admission to an appropriate governmental hospital, sanatorium, or asylum as the needs require.”<sup>11</sup>

Clifford Trafzer, author of Death Stalks the Yakama, discussed how Yakama tribal members disliked government control in their lives.<sup>12</sup> During the influenza, in her 1919 manuscript “The Red Cross and the Okanogans,” Mourning Dove, a Colville tribal member reported: “No aid had been offered the stricken Indians across the Canadian border. Relief is sent to foreign lands, not even denighed [denied] the baby murdering, women mutilating Hun, but none has been forthcoming for the dying, simple minded native at our very door on the North.”<sup>13</sup> During the pandemic, Mourning Dove also wrote that “In some cases the aged and superstitious could not be induced to leave their squallid[squalid] homes, but remained to fight fate with that stoic indifference to death for which our race is renowned.”<sup>14</sup>

How did government indifference, and distrust among Native Americans affect the Bureau of Indian Affairs’s record keeping and documentation? Author Clifford Trafzer and other researchers argued that many contract physicians and medical staff did not maintain good health records. Death Certificates were often neglected.<sup>15</sup> For instance, on January 4, 1919, on the Colville reservation, the Superintendent had to write to Doctors Lane, McRae, and Johnson, demanding accounts: “Of course I realize that there were many cases of influenza among the Indians where a doctor was not called. In so far as

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<sup>11</sup> M.C. Guthrie, “The Health of the American Indian.” *Public Health Reports (1896- 1970)*. 44, No. 6 (1929), 946.

<sup>12</sup> Trafzer, *Death Stalks the Yakama*. 85.

<sup>13</sup> *Mourning Dove: A Salishan Autobiography*. Ed. John Miller (Lincoln, NB: University of Nebraska, 1990) 192.

<sup>14</sup> *Ibid*, 190.

<sup>15</sup> Trafzer, *Death Stalks the Yakama*. 84.

you can, furnish the number of Indians that were afflicted in your district.”<sup>16</sup> This lack of documentation continued into the late 1920’s. On August 3, 1928, the Superintendent of the Colville Agency wrote to Dr. Ronald McRae, stating: “We are trying hard to keep our Birth and Death records up to date; we have had no reports from the Inchelium District since April, and I would ask that on your visits on the reservation that you ask for this information. These records should be sent in, as soon after they happen, as possible.”<sup>17</sup> As a result, the government documentation before 1920s was incapable of providing a complete picture of the influenza pandemic on Pacific Northwest Reservations.

To compensate for this lack of information, the research of this study utilizes a myriad of primary sources from various archival repositories and libraries. Government records in the collections of the “Colville Indian Agency,” “Northern Indian Agency,” and “Yakima Indian Agency” were housed in the National Archives and Record Administration’s Northern Branch in Seattle, Washington. Government records consisted of statistical information, correspondences between superintendents and doctors, and hospital reports. The Jesuit Oregon Province Archives, at Gonzaga University, houses the mission collections which were edited and transferred to microfilm. Within these collections, data from diaries, burial records, and church censuses provide a few detailed accounts of the influenza epidemic on the reservations. The Nez Perce National Park’s Archives, located in Spalding, Idaho, provided the “Records of Interments” and research on the local missions. Newspaper articles and clippings were extracted from various local newspapers including the *Lewiston Morning Tribune*, *Spokane Chronicle*, *Yakima*

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<sup>16</sup> Superintendent to Drs. Lane, McRae, Johnston, January 4, 1919. Folder: Health and Sanitation. Box 217a. Northwest Regional Branch Archives, Seattle, WA RG 75.

<sup>17</sup> Superintendent Meyer to Ronald McRae, August 3, 1918. Folder: Roderick Ronald McRae Manuscript, Archives, and Special Collections. Pullman, WA Cage 3012.

*Morning Herald, Omak Chronicle, Kamiah Progress, and Marcus Messenger.*

Additional primary sources include personal papers of individuals and the manuscript “Red Cross and the Okanogans,” written in 1919 by Mourning Dove, a Native American author and Colville tribal member.

Secondary sources were comprised of books, scholarly journals, theses, and websites. Books such as John Barry’s The Great Influenza and Alfred Crosby’s America’s Forgotten Pandemic provided an overall view of the influenza pandemic. Additional text on Native American Health and Culture such as Death Stalks the Yakama, Forgotten Voices of the Yakama, and Mourning Dove: A Salishan Biography contributed regional information. Articles from the *Pacific Northwesterner*, *Idaho Yesterdays*, and *Oregon Historical Quarterly* offered a historical perspective on the Pacific Northwest and local Native American history. Ph.D. Theses such as “Fighting the Scourge: American Indian Morbidity and Federal Policy, 1897-1928” by Diane T. Putney and “The Nez Perce struggle for self government; a history of Nez Perce governing bodies, 1842- 1960” by Robert Jamey Riley contained additional data on reform legislation and tribal healthcare in the early twentieth century. Also data from websites produced by the “Centers for Disease Control and Prevention,” “National Archives and Records Administration,” and “Indian Health Services” provided medical research, which was incorporated into the study.

This thesis has certain parameters. It primarily focuses on material pertaining to the Spokane, Nez Perce, Colville, and Yakima Reservations located in the Pacific Northwest. In addition, due to the time frame, the majority of the information centers on primary sources that were created before World War II. As a result, this study does not

concentrate on the reservations' modern health care facilities or the effects on current influenza epidemics. Statistical data and information from local white populations in the Eastern Washington will be compared and contrasted with Native American ones.

## Chapter 1

After the signing of the treaties in 1855 at Fort Walla Walla, the Pacific Northwest tribes experienced a difficult time of transition. A soldier and observer at the Walla Walla Council proceedings, Kip Lawrence wrote in his journal, “All but the Nez Perce were evidently disinclined to the treaty, and it was melancholy to see their reluctance to abandon the old hunting grounds of their fathers and their impotent struggle against the overpowering influences of the whites.”<sup>1</sup> Only nine tribes signed the treaties in 1856. Eventually, the tribes, who refused to sign, were forcefully relocated.<sup>2</sup> Utilizing legislative policies and reform programs, the federal government consolidated all Pacific Northwest tribes onto reservations. As a result, family members such as aunts, uncles, grandparents, and parents were separated, which caused havoc in the local social structure of many Native American communities.<sup>3</sup> The “Palouse, Pisquose, Yakama, Wenatchapam, Klinquit, Oche Chotes, Kow way sayeee, Sk'in-pah, Kah-miltpah, Klickitat, Wish ham, See ap Cat, Li ay was, and Shyiks” were forced onto the Yakima Reservation, which was only 1,875 sq. miles.<sup>4</sup> The Nez Perce Reservation became the home of the “Nimiipuu,” also known as the Nez Perce tribe. This reservation was originally 13 million acres which extended from the Idaho border into Washington State.<sup>5</sup>

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<sup>1</sup> Colonel Kip Lawrence, *Indian Council at Walla Walla*. (Seattle, WA: The Shorey Books Store, 1971) 22.

<sup>2</sup> Daniel J. Rooney, *Preliminary Inventory of the Records of the Bureau of Indian Affairs, Colville Indian Agency, Including the Spokane Subagency, 1865 -1964*. (Seattle, WA: Northwest Regional Archives, Branch, June, 1973) email attachment from Archivist Ken House at Northwest Regional Archives, Branch, Seattle, WA RG 75.

<sup>3</sup> Clifford Trafzer. “The Legacy of the Walla Walla Council, 1855.” *Oregon Historical Quarterly* 106, no. 3 (2005) 401-402.

<sup>4</sup> “Confederated Tribes and Bands of the Yakama Nation.” *Yakama Nation*. (Accessed September 19, 2011) <http://www.yakamanation-nsn.gov/>; Helen Willard, *Pow Pow and other Yakima Indian Traditions* (Prosser, WA: Roza Run Publishing Co. 1990) 12.

<sup>5</sup> Caroline James, *Nez Perce Women in Transition 1876- 1900* (Moscow, ID: University of Idaho Press, 1996) 7.



In 1879, the “Colville Reservation” was formed to house thirteen non-affiliated tribes, “St. Joseph’s Nez Perce tribe, Methow, Okanogan, Arrow Lakes, Sanpoil, Nespelem, Chelan, Entiat, Moses-Columbia, Wenatchi, Palus, and Colville” which refused to sign any “peace” treaty.<sup>6</sup> About three months later, this plot of land was again reduced, which was a third of its original size, 2,886, 000 acres. On January 8, 1881, the Spokane Reservation was formed and located south of the Colville reservation and placed under the administration of the Colville as a subagency. Here, the Spokane tribe along with the Chewelahs, was forced onto a small plot of land consisting of 141,380 acres.<sup>7</sup>

According to Clifford Trafzer, author of *Death Stalks the Yakama*, the reservation system had both negative and positive effects on tribal communities. These Native Americans found their society, culture, and environment forcefully taken away. These dramatic changes also took a toll on the Native Americans’ overall health. They became more susceptible to diseases due to a poor diet, minimal income, unsanitary living conditions, and lack of overall medical care.<sup>8</sup>

As the tribes were relocated and consolidated, most Native Americans tried to retain some of their local cultures and languages. They built government sponsored homes on the reservations. These tribal members also raised livestock and grew gardens with government supplied seeds. However, traditional homelands and customs were not

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<sup>6</sup> “Facts About The Tribe.” *The Confederated Tribes of the Colville Reservation*. (Accessed September 19, 2011) <http://www.colvilletribes.com/facts.php>.

<sup>7</sup> Daniel J. Rooney. *Preliminary Inventory of the Records of the Bureau of Indian Affairs, Colville Indian Agency, Including the Spokane Subagency, 1865 -1964*. (Seattle, WA: Northwest Regional Archives, Branch, June, 1973) email attachment from Archivist Ken House at Northwest Regional Archives, Branch, Seattle, WA RG 75.

<sup>8</sup> Trafzer. “The Legacy of the Walla Walla Council, 1855.” 401-407.

completely abandoned. Tribal members continued to follow the seasons and travel to these areas to procure food, using traditional hunting and gathering methods.<sup>9</sup>

This access to these traditional lands was one of the treaties' stipulations and was granted to each tribal member. The Yakima Treaty of 1855 stated that "The exclusive right of taking fish in all the streams, where running through or bordering said reservation, is further secured to said confederated tribes and bands of Indians, as also the right of taking fish at all usual and accustomed places, in common with citizens of Territory, and of erecting temporary buildings for curing them; together with the privilege of hunting, gathering roots, and berries, and pasturing their horses and cattle upon open and unclaimed land." The treaties of the Colville, Spokane, and Nez Perce contain similar language.<sup>10</sup>

Hunting, gathering, or grazing stock were important to Native Americans both practically, physically, and culturally. In the past, a good catch of fish and harvest of roots protected the tribal communities from famine and starvation in the wintertime.<sup>11</sup> On reservations, it enabled the Native Americans to retain their independence from the government.<sup>12</sup> Spiritually, the gathering of food connected the Native Americans with their Creator and the environment that provided for them. According to Et-twaii-lish, a food gatherer on the Umatilla Reservation, food held a special connection in Native American culture and was an important element of many ceremonies. She stated "In addition to first food feasts, there are the first kills and salmon feasts for the boys and first roots and first berries feasts for girls. Food is also important at gatherings that mark

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<sup>9</sup> Ibid, 401.

<sup>10</sup> Fronda Woods. "Who's in Charge of Fishing?" *Oregon Historical Quarterly* 106, no. 3 (2005) 412.

<sup>11</sup> Henry Spinden, *The Nez Perce Indians* (Whitefish, MT: Kessinger Publishing LLC. 2006) 195 -199.

<sup>12</sup> Robert E. Ficken. "After the Treaties: Administering Pacific Northwest Indian Reservations." *Oregon Historical Society* 106, no. 3 (2005) 446.

weddings, baby trades (when in-laws exchange gifts between the families and for the new baby), funerals, receipt of an Indian Name, and at the end of a mourning period, as well as modern events recognizing birthdays and sport or educational accomplishments.”<sup>13</sup> She further describes that it doesn’t have to be a special occasion but a family coming together to celebrate. According to Et-twaii-lish, “When food is shared and eaten, it is a time to open your heart and speak truthfully about how you feel.”<sup>14</sup> In the past, the majority of the food served at these feasts came from the wild. Salmon, the main staple of most Pacific Northwest tribes were caught from local streams and served along with meats and other fish. In addition, various roots and berries were served including Camas, Bitterroot, Biscuit Root, Indian Carrot, Huckleberries, Chokeberries, Blackberries, and Strawberries.<sup>15</sup>

The harvesting of foods reflected certain traditions which were based on a respect for the environment. In the Yakima tribe, the cycle began in February with the fishing for the salmon along the Columbia and Yakima rivers. These two rivers teemed with a variety of fish including “Salmon, Chinook, Sockeyed, Chum, Trout, and Steelhead,” which provided a plentiful food source for the tribe. In the early twentieth century, an observer reported that between 1,000 to 2000 families camped at the Celilios, an area located along the Columbia River. Before fishing, fishermen waited for their leader’s permission to begin. This waiting period enabled a few fish to travel upstream and spawn. Then several fish were caught and prepared for the “First Salmon” Feast. During this ceremony, the people thanked the Creator for this vital source of food. Afterwards,

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<sup>13</sup> Majorie Waheneka. “Et-twani-lish(Wahaneka), Indian Perspective on Food and Culture.” *Oregon Historical Society* 106, no. 3 (2005) 471.

<sup>14</sup> Ibid.

<sup>15</sup> Ibid.

utilizing spears and nets, the fishermen were permitted to fish. Women waited on the banks to clean the fish, which were later dried or smoked.<sup>16</sup>

In late April, families traveled to the root-digging grounds. As in the ceremony of the Salmon, the Yakima held a “First Root” feast in order to give thanks to the Creator for this vital sustenance. A group of Yakima women ventured into the grounds and gathered enough bulbs for the feast. According to Ruth Howard, a Yakima tribal member, “The women must go willingly and they must have no anger in their hearts.”<sup>17</sup> During the gathering, the women collected about twenty different species of roots including Bitter roots, Punk-u, Sekou-ya, and Mumman. To harvest these roots, a Cuppin, a curved bent stick that was thirty inches long with a hardened point was used. Its handle was comprised of antler or horn. Utilizing this tool, women uprooted the plants and extracted the roots from underneath.<sup>18</sup>

The Yakama women possessed a variety of techniques to process and preserve these foods. The “Bitter roots” which grow in various parts of the Northwest,”... is [are] dried and steamed and cooked for a few minutes.”<sup>19</sup> This root was eaten like a potato or used as a thickening agent in gravy. The “Punk-u,” a small round root was eaten raw or hung to dry using its “string like heads.” Women also ground dried punk-u into a powder which was mixed with ground “Sekou-ya” or “Mumman.” This mixture was made into dough for bread and biscuits. “Sekou-ya,” a large round root was generally “peeled, ground, dried and used in wintertime mush. It is good plain or with fish.”<sup>20</sup> “Mumman,”

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<sup>16</sup> Helen H. Schuster. *The Yakima*. (New York, NY: Chelsea House Pub. 1990) 22.

<sup>17</sup> Helen Willard. *Pow Pow and other Yakima Indian Traditions*.(Prosser, WA: Roza Run Publishing Co. 1990) 24.

<sup>18</sup> Ibid.

<sup>19</sup> Ibid.

<sup>20</sup> Ibid.

another white root, was prepared in a similar manner. The women also harvested Wild Celery, Carrots, Onions, and Potatoes.<sup>21</sup>

The Nez Perce tribe possessed similar traditions. In the spring and fall, Nez Perce fished along the Clearwater and Columbia Rivers for Lamprey Eels, Chinook, Steelhead, Cut-throat, trout, Waha Lake Trout and Sturgeon. Like the Yakamas, the Nez Perce held their “First Salmon Feast.” In a 1996 interview, by an eighty-four-year-old Nez Perce tribal member described, “From the beginning when the salmon start running up the river and everybody knows it is going to be a good salmon runway. They catch them and they would decide to put on their salmon feast. The women get ready. The men would catch the salmon and the women cooked them and they all get there. It comes about the same time the roots are ready. The women prepared it all and they all come. In a way, it’s a prayer for thanksgiving, for the Creator to give them this food, and it’s a blessing[sic].”<sup>22</sup> Utilizing nets and fishing spears, the men caught the fish while the women waited on the bank, to clean and prepare them. According to Henry J. Spinden, author of The Nez Perce Indians, salmon was processed by broiling and baking followed by broiling, again.<sup>23</sup> The fish was cut lengthwise and baked in hot ashes. Later on, it was boiled in sealed baskets. The fillets of salmon were skewered with sticks and placed on racks to be dried or smoked. An eighty-two year old Nez Perce member explained: “The whole family traveled down to Celilio to fish. They made fish fillets and used tiny little willow sticks to support them while being dried. They fillet them and lay them up putting willow sticks through the part of the flesh to hold them in the space quite straight. I have seen a lot of

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<sup>21</sup> Ibid.

<sup>22</sup> James. *Nez Perce Women in Transition 1876- 1900*. 26.

<sup>23</sup> Spinden. *The Nez Perce Indians*. 195-199.

them. They have racks and racks down the Celilio.”<sup>24</sup> Eels were dried on racks or eaten fresh. The Unions, small shell fish located in the Snake and Clearwater rivers were caught and “steamed” in a pit of ash. Later on, they were dried for future use. Men also hunted for elk, and sheep. On occasion, tribes that lived near the Great Plains hunted buffalo as well. Red meat was dried and turned into jerky.<sup>25</sup>

Like the Yakima, Nez Perce women were the main food gatherers. They were responsible for collecting the roots and plants, including Camas Roots, Bitter Roots, Wild Onions, Mushrooms, Wild Celery, Carrots, and Kouse, another root. Women utilized the Tuk’es, a digging tool similar to the Yakima’s Cuppin. It was a stick about two and half feet long with a handle comprised of antler, bone, or wood. To operate it, a person gripped both sides of the handle and pulled down. These vegetables and roots grew in variety of locations. Kouse roots grew in “dry rocky soil and were gathered by the Indian women along the brows of steep hills.”<sup>26</sup> Bitterroots grew in the “Bitterroot Mountains” and the foothills close to Imaha.<sup>27</sup> These roots were gathered and placed in cylindrical baskets. Later on, they were dried and stored for winter.<sup>28</sup>

In June and July, the tribe travelled to the Camas grounds located near Moscow, Idaho to harvest the Camas root. This main staple of the Nez Perce could be eaten either raw or cooked. To cook it, women filled a pit with heated rocks. On top of these rocks, they placed layers of sod and grass. Camas bulbs were cleaned, placed on top and sprinkled with water. Then, another layer of soil covered the roots. The roots steamed for about twelve hours to three days. After being cooked, Camas roots turned a dark

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<sup>24</sup> James, *Nez Perce Women in Transition 1876- 1900*. 26.

<sup>25</sup> Spinden. *The Nez Perce Indians*, 205-212.

<sup>26</sup> Ibid, 203.

<sup>27</sup> Ibid.

<sup>28</sup> Ibid, 200-205.

brownish color and contained a sweet flavor. They were then ground into a powder that mixed into a dough which was molded into a loaf. These loaves were rolled in grass and steamed. During this process, fresh bulbs were placed in between the loaves to allow the steam to circulate. Afterwards, these loaves were taken out and broken into smaller pieces that were dried by the sun or the campfire.<sup>29</sup>

In April and May, the Kouse root, another important dietary staple of the Nez Perce, was harvested. This root was “tuberous” looking and could be eaten either raw or cooked. The root’s outer layer was first scraped off, then it was dried in the campfire. The dried Kouse was then pounded into a powder “in mortars” which was mixed with water to form a gruel.<sup>30</sup> Women also baked loaves of Kouse. The ground Kouse was mixed with water then molded into cakes and placed on a stick frame suspended over a fire and dried. Bitter root, another important staple of the Nez Perce diet, was also dried.

Nez Perce had various techniques for preparing and preserving berries which were found along waterways. They also collected Huckleberries growing in the mountainous regions of the Pacific Northwest. Serviceberries and Blackberries were collected and formed into dried cakes. Chokeberries and Huckleberries were boiled. Strawberries, Salmon berries, Currants, and Gooseberries were eaten fresh.<sup>31</sup>

With farming and development of the land, the environment changed, destroying the Indian’s traditional food supply and culture. Also, the Nez Perce and Yakima Indians could no longer dig for Camas root or other vegetables due to the white agricultural development and fencing of the prairie. In addition, the grazing of cows and other farm animals destroyed native plants’ root systems and allowed the ground to dry and harden.

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<sup>29</sup> Ibid, 195-199.

<sup>30</sup> Ibid, 203.

<sup>31</sup> Ibid.

In addition, superintendents of Indian agents and white settlers tried to persuade tribal members to remain on the reservation, rather than venturing outside to hunt and gather.<sup>32</sup>

In the late nineteenth century, a governmental movement began, entailing the restructuring of the Office of Indian Affairs and an aggressive assimilation of Native Americans into white culture. Unfortunately, a few whites believed that Native Americans “should die off like wild animals.”<sup>33</sup> President Rutherford B. Hayes stated that the government did not intend to harm the Native Americans. In October 1880, in a speech at Chemewa Indian School in Oregon, Hayes reported “If they are extinct to become extinct, we ought to leave that to Providence, and we, as good patriotic, Christian people, should do our best to improve their physical, mental, and moral condition.”<sup>34</sup> Utilizing legislative policies and reform initiatives, government reformers employed various tactics such as education and lifestyle to implement the reform ideals to achieve their goals of assimilation.

In 1873, Congress implemented one of many reform laws by eliminating superintendents of Indians. This edict enabled the Indian Affairs Department to have direct control over field agents, which encouraged efficiency and honesty. Federal officials also developed an inspectorate system for the Indian Affairs which was intended to audit reservation management, especially in the West. The purpose of these reforms was to increase the efficiency and management of the system and provide better benefits to the Native Americans. Unfortunately, these reforms proved ineffective and enabled corruption to spread quickly within the agencies with the removal of the

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<sup>32</sup> Trafzer. “The Legacy of the Walla Walla Council, 1855.” 401-402.

<sup>33</sup> Trafzer. (ed.) *American Indians/American Presidents: A history*. (Washington, D.C.: Smithsonian Institute, 2009) 128.

<sup>34</sup> *Ibid.*



superintendents.<sup>35</sup> In the Northwest, for example, cattle owned by local white settlers and federal officials grazed on tribal land. In 1873, Robert H. Milroy, a former Civil War general, was suspended from his duties as an official for the Washington superintendence. He was accused of “complicity with ... frauds’ and “weakness and incapacity.”<sup>36</sup> He eventually was appointed to the agencies of Yakima and Medicine Creek.

Another attempt to assimilate Native American was the Dawes Allotment Act of 1887, developed by Senator Henry L. Dawes, who was the head of the Congressional Committee of Indian Affairs. This act enabled Congress to divide the reservations into allotments and distribute the plots to tribal members. According to the Act, each family was to receive one hundred sixty acres in order to farm. Individuals over eighteen would obtain eighty acres. In addition, Congress would then buy unassigned plots at a very low price and then sell them to white settlers.<sup>37</sup> The act stipulated “lands not taken in allotment” were to be “sold to the highest bidder at no less that \$1.25 per. acre.”<sup>38</sup> As a result, Native Americans’ communal ownership was destroyed. Many federal officials believed the allotment would encourage tribal members to accept western ideals and become assimilated farmers, incorporating into white society. In 1889, in his plan to implement the Dawes Act, T.J. Morgan, Commissioner of Indian Affairs, stated “The Indians must conform to “the white man’s ways,” peaceably if they will, forcibly if they

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<sup>35</sup> Robert E. Ficken. “After the Treaties:” 442-444.

<sup>36</sup> Ibid.

<sup>37</sup> Steve Gunn. *Indian General Allotment Act (Dawes Act) 1887*. (Accessed January 1, 2012). <http://www.enotes.com/indian-general-allotment-act-dawes-act-1887-reference/indian-general-allotment-act-dawes-act-1887>

<sup>38</sup> Trafzer (ed.) *American Indians/American Presidents*: 124.

must... They can not escape it, and must either conform to it or be crushed by it.”<sup>39</sup> Other government reforms initiated by Congress were forced education in boarding schools, and the repression of Native culture, religion, and language. Despite good intentions, government officials and reformists thought they were wiser than the Native Americans.<sup>40</sup>

Many government officials believed that Native Americans’ travelling and gathering food hindered their entrance into white western society and insisted that they stay on the reservations. This isolation also was supposed to protect them from various diseases, such as tuberculosis and measles, conflict with settlers, and vices such as drinking and gambling which were all introduced by white populations. In 1877, the United States Indian Inspector, E.C. Watkins, stated “The ease with which these Indians can secure food ... from streams and the Ocean, is a great hindrance in their civilization.”<sup>41</sup> The hindrance was the nomadic living of Native Americans which enabled them to travel without government supervision. In addition, Native Americans didn’t understand why they should farm fields, when they could fish for salmon nearby.<sup>42</sup>

Some officials and medical physicians from American White Western Society promoted that if Native Americans lived in sanitary homes, cooked proper food, and followed the white western life style, they could avoid contracting diseases such as tuberculosis, influenza, and pneumonia. In the commissioner’s annual report for 1919, Cato Sells stated that the field matron’s duty was to promote sanitation and healthy living

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<sup>39</sup> Robert James Riley. *The Nez Perce struggle for self government; a history of Nez Perce governing bodies, 1842 -1960*. (Thesis) University of Idaho Special Collections, Moscow, Idaho, 50.

<sup>40</sup> Steve Gunn. *Indian General Allotment Act (Dawes Act) 1887*. (Accessed January 1, 2012) <http://www.enotes.com/indian-general-allotment-act-dawes-act-1887-reference/indian-general-allotment-act-dawes-act-1887>.

<sup>41</sup> Ficken. “After the Treaties:” 442-444.

<sup>42</sup> Ibid.

in Native American homes by teaching mothers and daughters.<sup>43</sup> On January 23, 1919, in a letter to Dr. C.W. Lane, the superintendent of the Colville agency wrote “The Commissioner of Indian Affairs wants field matrons on reservations. He is very much interested in the campaign to eradicate Tuberculosis and Trachoma and to develop better sanitary conditions in the homes of Indian allottees.”<sup>44</sup>

Federal reform efforts did force Native Americans to adapt. Many tribal members sought employment off reservations in order to provide for their family and procure food. Foods high in starch were introduced into their diets. This increase in carbohydrates from potatoes and flour made tribal members more susceptible to disease and bacteria. However, employment on the reservation was scarce, which forced many tribal members to relocate to urban areas to find work. Individuals who remained on the reservation lived at or a little above the poverty line. Some tribal communities such as the Nez Perce became farming communities and members worked the land. They sold their livestock to whites and other fellow Native Americans. Produce from family gardens and gatherings of roots and berries on the reservation grounds were also sold. Other tribal members became manual laborers who worked in the fields of local farmers. Some were traders and sold tribal art and personal belongings to whites. Others herded cattle and horses for local white ranchers. A few tribal members in the Pacific Northwest also tried to become ranchers and homesteaders. Unfortunately, white authorities from the county terrorized

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<sup>43</sup> United States. 1919. Annual report of the Commissioner of Indian Affairs, for the year. Washington: G.P.O.

<sup>44</sup> Superintendent to Dr. C.W. Lane, January 13, 1919, Folder: Okanogan Physician Box 119a Northwest Regional Archives, Branch, Seattle, WA RG 75.

these individuals by seizing their livestock, game, and produce. These Native American ranchers were eventually forced to return to the reservation.<sup>45</sup>

Housing was another concern for Pacific Northwest tribes. In the past, traditional lodging varied among Pacific Northwest tribes but all structures possessed a practical quality. They were light and mobile and enabled tribes to travel great distances in search of food. After leaving camp areas, several white individuals noted how clean the abandoned campgrounds were with little waste or escaped sewage issue with the first rain.<sup>46</sup> Mourning Dove described in her autobiography a Colville tribal member who, as a child, lived with her family in a tipi on the Colville Reservation. Employing six to ten poles for support, this little dwelling was covered with hides. In the wintertime, a mixture of soil and birch limbs surrounded the base to keep out drafts.<sup>47</sup> The Okanogan and Colville tribes used a wooden frame dwelling covered with mats.<sup>48</sup> In the early 18th century, Yakima lived in structures known as Kaatnams consisting of four wooden frame walls covered with tule mats. To protect against the elements, dirt was built up along the sides. In times of travel, these dwellings were quickly dismantled and transported.<sup>49</sup> Nez Perce's traditional housing was long communal houses, in the form of an "A" tent. Two ridge poles were the main support. Other poles were laid against these supports which allowed hides and mats to be stretched across the frame. In these long houses, several families lived together. In the summer, the Nez Perce resided in a tipi whose frame held

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<sup>45</sup> Trafzer. "The Legacy of the Walla Walla Council, 1855." 401- 406.

<sup>46</sup> The Institute For Government Research. *The Problem of the Indian Administration*. (Baltimore, MD: The John Hopkins Press, 1928) 191- 206.

<sup>47</sup> *Mourning Dove: A Salishan Autobiography*. (Lincoln, NB: University of Nebraska Press, 1990) 17.

<sup>48</sup> James A. Teit and Franz Boas. *The Okanogan Indian*. (Seattle, WA: Shorey Book Store, 1973) 226-229.

<sup>49</sup> Helen Schuster. *The Yakima*. 30.

about 10 to 12 poles covered by mats or hides. Summer tipis were mobile allowing for families to easily travel from place to place.<sup>50</sup>

Eventually, traditional lodges such as tipis, longhouses, and the Kaatnam disappeared. The government pressured Native Americans into living in one to two room shacks which were comprised of pressed board and had dirt floors were built cheaply to government specifications. In most dwellings, several families resided together. As a result, these shacks were crowded, which did not allow for circulation of air or light. In times of epidemics, there was no room to isolate or quarantine family members who were infected. So the disease rapidly spread to all. Most of the dwellings had no running water or facilities. Water was carried from springs, or streams, and sometimes wells on the property, which were located some distance away. Wood for warmth and cooking was carried a distance as well. Tribal members had a difficult time dealing with raw sewage. With this environment, communicable disease spread rapidly with in a home and soon to all.<sup>51</sup> As a result, the remaining healthy individuals found it difficult to care for their sick family members while maintaining the house, and storing food, water, and wood. In her manuscript, Mourning Dove, who was half Colville and Okanogan, criticized federal policy by stating: "... the Government and misguided reformists thrust upon him a condition unfitted to his bodily comfort... Often times a large family will occupy a single room, day and night with windows hermetically sealed."<sup>52</sup>

Given all the Native American health issues related to diet and hygiene, traditional medicine couldn't combat the new diseases brought by Whites. During the

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<sup>50</sup> Henry Spinden. *The Nez Perce Indians*. 195-196.

<sup>51</sup> The Institute For Government Research. *The Problem of the Indian Administration*. 560- 563. : Trafzer. *Death Stalks the Yakama*. 75.

<sup>52</sup> *Mourning Dove: A Salishan Autobiography*. 192.

establishment of the reservations, Tribal leaders requested white physicians and healthcare for their people.<sup>53</sup> The Nez Perce Treaty of 1863 stipulated that “Twelve hundred dollars for the erection of the hospital, and providing the necessary furniture for the same.”<sup>54</sup> Only Native Americans who lived in the proximity of medical facilities were able to access the federal healthcare. However, the healthcare provided by the Federal Government was poor. Due to communication and cultural barriers, many tribal members had difficulty obtaining medical assistance and chose to return to traditional medicine or make arrangements with another non Indian physician.<sup>55</sup>

In the late nineteenth century, Congress’s primary concern was to avoid overspending. As a result, only enough money was allotted to meet the demands of treaties, initiate reforms, and pay the salaries of staff. Unfortunately, the money wasn’t sufficient to provide adequate medical care for tribal communities and to maintain the boarding schools.<sup>56</sup>

In 1928, the government conducted a national investigation of the Office of Indian Affairs and living conditions of Native Americans. In the report entitled, Problems with Indian Administration, (formerly known as the Meriam Report) they uncovered several flaws in the system. The report noted the unsanitary environments in which the Native Americans were living, the overcrowding in homes and the raw sewage prevalent in and near so many dwellings. The report eventually compared and contrasted the modern houses of Native Americans to their traditional tipis and katnams, stating that

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<sup>53</sup> Nez Perce Tribe, *Treaties Nez Perce Perspective*. (Washington, D.C.: The United States Department of Energy and Confluence Press, 2003) 107.

<sup>54</sup> Nez Perce Tribe, *Treaties Nez Perce Perspective*. 118.

<sup>55</sup> The Institute For Government Research. *The Problem of the Indian Administration*. 191-206.

<sup>56</sup> Ficken. “After the Treaties:” 445.

these traditional lodges were more sanitary and healthier. In fact, the Tipis provided better ventilation for the occupants compared to the sealed confines of the houses.<sup>57</sup>

The Meriam report also stated that the government failed to provide adequate medical treatment for patients. Due to poor funding, researchers found that most medical facilities were staffed with poorly trained people when compared to facilities for whites. Most field matrons employed by the Indian agency had no education or medical training prior to their employment. Instead of providing medical attention, the field matron's purpose was to educate the household. Excellent physicians did not stay long due to low pay and lack of support. Reservations lacked medical supplies and facilities such as hospitals. Existing hospitals were below standards. Researchers compared them to ones found in poor white communities. Most of these reservation hospitals did not have enough beds for existing patients. Standards of sanitation and cleanliness were not maintained and patients were often neglected for days.<sup>58</sup>

According to the Meriam Report, most contract physicians who were employed by the reservations neglected to maintain medical records, not even death certificates. In their report, researchers explained that public health officials needed the information to track down communicable diseases and determine their causes. These records would provide essential information to treat patients and cure diseases. County health officers and other officials began complaining as well.<sup>59</sup> On June 17, 1918, C.F. Webb, the Health Officer at Republican Washington for Ferry County, sent a letter to the Commissioner of Indian Affairs addressing a health concern about a recent outbreak of smallpox. He wrote "C.E., a farmer for this district, informed me had notified the Indian physician of the

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<sup>57</sup> The Institute For Government Research. *The Problem of the Indian Administration*. 191-206.

<sup>58</sup> *Ibid*, 191-203.

<sup>59</sup> *Ibid*, 191-203.

existence of a three cases of smallpox. The physician did not visit or even report them to the health officer, nor were they quarantined by any officer of the Indian department. The State requires all contagious or infectious diseases be reported to the health officer, he in turn is required to report to the State. They have not yet reported these cases.”<sup>60</sup> On August 5, 1918, in a letter to the Commissioner of Indians Affairs, the superintendent of the agency reported the situation. He wrote:

The Agency physician advised writing to the State Board of Health and sending a copy of a letter to the Commissioners of Ferry County in order that all local authorities might be advised of the existence of the disease in this locality. The disease broke out in the district which is reached with difficulty by the nearest physician, Dr. R.D. McRae, located at Hunters, Washington, who renders medical services to the Indians on the eastern part of the Reservation under contract. Dr. McRae evidently regarded this case as not subject to report by him since it was not located under the jurisdiction of the United States. I am notifying Dr. McRae by letter, copy of which is inclosed,[sic] requesting him in the future to report such cases to the County Health Officers and requesting that he make a report in the case of the small pox in the Dana family at once to the proper party.<sup>61</sup>

Most Native Americans also lived in isolated rural areas which made it physically difficult to visit a hospital or notify a doctor.<sup>62</sup> On Aug 3, 1917, in a letter to his superior, Father Griva of the Sacred Heart Mission at Colville reported that it took a priest three to four days to visit parishioners on the outskirts of the Reservation by horse or on foot. In some rural reservation areas, there was not a doctor within 25 miles. Father Griva also noted that the railroad and the hospital were quite a distance for his parishioners who needed urgent medical attention.<sup>63</sup> In his “Indian Field Service” account, Dr. Ronald McRae rode eighteen miles for each influenza patient, Robert Kersen, and Victor

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<sup>60</sup> C.F. Webb to Commissioner of Indian Affairs, June 17, 1918. Folder: Health and Sanitation Box 217a Northwest Regional Archives, Branch, Seattle, WA RG 75.

<sup>61</sup> Superintendent of Colville Agency to Commissioner of Indian Affairs, August 5, 1918, Folder: Health and Sanitation Box 217a Northwest Regional Archives, Branch, Seattle, WA RG 75.

<sup>62</sup> The Institute For Government Research. *The Problem of the Indian Administration*. 223.

<sup>63</sup> Father Edward Griva to Very Reverend Richard A. Gleeson, August 3, 1917. Folder: To Jesuit Fr. Richard Gleeson, S.J. From Edward Griva, S.J. Box 1, *Sacred Heart Mission Collection*, Jesuit Oregon Province Archives, Spokane, WA.



Dupuis.<sup>64</sup> In a direct petition to the reservation's superintendent, a number of Colville residents requested that a hospital be built on the reservation with the Sisters of Providence managing the facilities. Unfortunately, the archival records provided did not indicate if their request was fulfilled.<sup>65</sup>

Other concerns were raised about the safety and environment of the boarding schools. Over the years Native American parents complained to the federal government about the poor living conditions at the schools. Questions about the lack of food and child abuse were raised by the families. The Meriam Report, for example, was noted that most students did not receive a balanced diet. They mainly ate meats and starches, whereas vegetables and fruits were rarely provided. As with adults, the increase in starchy foods made students susceptible to a variety of diseases. Investigators also found that boarding school facilities were generally inadequate. Most dormitories were overcrowded, beds too close together, allowing for poor ventilation and sunlight. Most schools possessed limited toilet facilities and out of door privies and there was an overall lack of soaps and towels for general cleanliness. Students in grades four and above were expected to work part of the day in order to support the school. This form of work raised questions of illegal child labor and went against certain state laws. In most states, this form of abuse was prohibited. With the unsanitary environment and forced labor the boarding schools were an ideal environment for the spread of communicable diseases.<sup>66</sup>

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<sup>64</sup> Ronald McRae. "Indian Field Service." n.d. Folder: McRae, Roderick Donald, 1864-1942. Manuscript, Archives, and Special Collections. Pullman, WA, Cage 3012.

<sup>65</sup> Petition to Commissioner of Indian Affairs, February 11, 1917. Folder: To the Commissioner of Indian Affairs, Petition for a Money for a Hospital, 1917, Box 1, *Sacred Heart Mission Collections*, Jesuit Oregon Province Archives, Spokane, WA.

<sup>66</sup> The Institute For Government Research. *The Problem of the Indian Administration*. 206-221.

Compounding the problem, buildings and structures on the school grounds were found to be substandard by government regulations. Many structures appeared to be run down. In some cases, they were also fire hazards. For example, the boarding school on St. Joseph's Mission, which was a part of the Lapwai Indian Agency's school system, experienced two fires. In 1916, the mission was completely destroyed by fire. Shacks were quickly erected to be used for the convent and the school. Due to hardships, two sisters died. Mother Superior Mary Loyola succumbed to the effects of the fire. Sister Mary de Paul became ill and died while she was working in the "Shanty" kitchen.<sup>67</sup> In October 4 1925, a second fire within ten years occurred which was disastrous. It started in the boys' dormitory and spread destroying several buildings. Twenty four of the occupants were rescued except for six boys. Five were Nez Perce, "Max Oslenberg, age 14 of Winchester, Idaho, Simon Broncheau, age 6, Andrew Fogarty, age 10; Edward Switzler, age 5; Lawrence Henry, age 10." The white one was "Anthony Soyda, 7 years old."<sup>68</sup> As a result, Father Cataldo worked to fire proof the school, which was rebuilt the following year.<sup>69</sup> The school was eventually closed in 1968.<sup>70</sup>

Despite Native American parents' protests, the federal government forcibly sent their children to these institutions for education. Boarding Schools generally followed the motto of Captain Richard Henry Pratt, founder of the Carlisle Industrial Indian School,

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<sup>67</sup> Father Cataldo to Father Quinn, December 1, 1923 from Jesuit Archives Province. *The Pacific Northwest tribes missions collection of the Oregon Province Archives of the Society of Jesus*. (Wilmington, DE : Scholarly Resources, c1987) Reel 23.

<sup>68</sup> "Six Fire Victims in Single Grave" *Lewiston Tribune*. October 7, 1925. "Newspaper Clippings from Jesuit Archives Province." *The Pacific Northwest tribes missions collection of the Oregon Province Archives of the Society of Jesus*. (Wilmington, DE : Scholarly Resources, c1987) Reel 23.

<sup>69</sup> Wilfred. P. Schoenberg. *A Chronicle of the Catholic Church of the Pacific Northwest, 1743-1960*. (Spokane, WA: Gonzaga Preparatory School, 1963) 367.

<sup>70</sup> Daniel R. Miller. *Little Patch of Idaho : A History of the Craig Mountain Region* (Lewiston, ID: Steeley Print and Binding, 2007) 146.

“kill the Indian and save the man.”<sup>71</sup> Native American children were forced to dress in western clothing and forbidden to use their native tongue. In addition, staff taught children that their customs, religious beliefs and traditional medicine were “superstitious” and “unchristian.”

Despite the government’s best efforts, many Native Americans returned to their native customs such as food gathering and traditional tribal medicine. Native Americans’ traditional medicine focuses on the maintaining the harmony between an individual and nature. Medicine endeavors to treat a person’s spiritual, physical, and emotional state. Today this form of medicine is referred to as “Holistic Medicine”.<sup>72</sup> From the Native American perspective, most diseases were caused by evil spirits tormenting an individual.<sup>73</sup>

Among the Northwest tribes, medicine men, women, or shamans were a central figure in Native American social life and in the traditional medicine. According to tribal belief, these individuals were responsible for curing the sick, bringing about good weather, and a prosperous harvest. Shamans could be either a man or a woman. The position of the shaman was determined partly by heredity and partly by their guardian spirit. These individuals possessed vast knowledge of herbal lore and sacred songs which were passed down from generation to generation. Their knowledge of plants was utilized in treating sore throats, infections, colds, burns, and various other ailments.<sup>74</sup> In a recorded interview on October 21, 1999, Roderick Wheeler, a Nez Perce tribal member,

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<sup>71</sup> Clifford E. Trafzer (ed.) *American Indians/ American Presidents: A history*. (Washington, D.C: Smithsonian Institute, 2009) 126.

<sup>72</sup> Nez Perce Tribe *Treaties Nez Perce Perspective*. (Washington, D.C.: The United States Department of Energy and Confluence Press, 2003) 107.

<sup>73</sup> Herbert J. Spinden. *The Nez Perce Indians* (Whitefish, MT: Kessinger Publishing LLC. 2006) 257.

<sup>74</sup> Ibid.

described how he contracted pneumonia as a little boy. His mother consulted the next door neighbor, a respected Medicine Man who suggested “to cook” him. He continued “He was going to cook it out of me. Wheeler described that “I sweat and I sweat. I was only like about three or four years old maybe ..”<sup>75</sup> In 1926, it was noted that 25 shamans were still living on the Nez Perce Reservation.

To most white government officials, traditional medicine was primitive and superstitious. In fact, these officials complained that every time an individual became ill the shaman was sent for first.<sup>76</sup> As a result, many white governmental officials and doctors considered that the practice of resorting to shamans held the tribes back from joining dominant society. This cultural bias dominated white superintendents’ and other officials’ decisions in regards to tribal health care. Federal officials discouraged tribal members from visiting Medicine Men or shamans and using their traditional medicine. On reservations such as the Yakama, officials tried to apprehend and arrest traditional healers. On January 6, 1916, in a memorandum, the superintendent identified several medicine men including “Captain Billy, Columbia Billey, Sam Puyette Salusking, Thomas Smartlowit, and his wife, Kyate Pachp, Lumhyat,”<sup>77</sup> Unfortunately, no evidence or record that indicated the capture of these individuals was found. On March 21, 1917, Don S. Carrs, superintendent of the Yakima Agency, wrote “ It is my belief that the Indian doctors do a great deal of harm and while the orders are that no person shall practice as such, the fact is that Indians alone can do more to stop the practice than anyone else. Notwithstanding the fact that they do a great deal of harm, some of the

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<sup>75</sup> Martha Holliday. Oral Interview: Roderick Wheeler. October 21, 1999. Online transcript. (Accessed December 8, 2012). <http://guweb2.gonzaga.edu/hanford/0627/trnscrpt.html>.

<sup>76</sup> Trafzer. *Death Stalks the Yakama*: 35.

<sup>77</sup> Memorandum of Yakima Superintendent , January 6, 1916, Folder Medicine Men, Box 264 Northwest Regional Archives Branch, Seattle, WA RG 75.

Indians keep on calling them every time someone gets sick , all of which is wrong.”<sup>78</sup> In a letter dated January 1916, the Assistant Commissioner, E.B. Merritt, stated: “The Office doesn’t feel that any distinction should be made in between the two kinds of medicine men referred to in your letter, and regardless of the wishes of the Indians, it desires that you shall do whatever you can to prevent their practice.”<sup>79</sup> In fact, during the influenza pandemic, the superintendent of the Colville Reservation blamed two deaths on the local shaman. In reality, white doctors were losing patients too.

On the Yakama Reservation, the medicine men and shamans were not the only ones the government was persecuting. The Shaker Church, a mixture of Catholic and Native American belief, was prominent in the Yakama Reservation. The church began in 1892 was founded by John Slocum, a Nisqually tribal member who lived in Mud Bay, Washington. The Shaker movement soon spread throughout the Columbia River. Two Shaker churches were located on the Yakama Reservation near White Swan and Satus. Members of the church believed that they held the power to cure diseases. Like Shamans, these Shakers cured illness created by “evil forces” and worked to remove the threat.<sup>80</sup> On March 4, 1917, in a letter to Fred Colfax, Superintendent, Don S. Carr reported that both Medicine Men and the Shakers needed to be eradicated. According to Carr, a group of Shaker members went to the home of sick individuals. There they prayed and performed ceremonies over the sick. Government officials believed that these ceremonies spread diseases through the Native American population. Carr concluded his letter by

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<sup>78</sup> Dons S. Carr to Fred Alfanza, March 21, 1917, Folder Medicine Men, Box 264, Northwest Regional Archives Branch, Seattle, WA RG 75.

<sup>79</sup> Trafzer. *Death Stalks the Yakama*: 35.

<sup>80</sup> Trafzer. *Death Stalks the Yakama*: 35, 44.

stating: “If you are going to stop Indian doctors, stop them all, Shakers and Indian doctor.”<sup>81</sup>

Herbal Lore was another component in Native American medicine and was passed down from generation to generation. Mourning Dove discussed how her maternal grandmother was noted for her knowledge of plants and the making of love charms. As Mourning Dove was a young woman, her grandmother tried to pass down her knowledge. In her autobiography, Mourning Dove refused to learn from her grandmother due to social pressure, which she later regretted. When she was older, Mourning Dove paid an elder to teach her herbal lore.<sup>82</sup> Traditional herbal knowledge was applied during the influenza outbreaks.

The most common cure for colds, rheumatism, and other ailments was the sweathouse. These structures were either temporary or permanent and primarily constructed near rivers. Sweat houses varied among the Northwest Tribes. On the Nez Perce Reservation, temporary sweathouses were constructed out of willow frames and covered with hides, while permanent ones had a similar frame but were covered with layers of moss and sod.<sup>83</sup> In the sweathouse, heated rocks were carried into the dwelling with two sticks. Water was sprinkled or poured over the rocks along with handfuls of either sagebrush or cedar, creating a vapor cloud to rise and fill the sweatlodge. Individuals sat in this cloud and sweated the ailments from their body. The vapor opened up the lungs and sweated out the disease. Afterwards, individuals plunged into the stream

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<sup>81</sup> Fred Colfax to Don S. Carr, March 4, 1917, Folder: Medicine Men, Box 264 Northwest Regional Archives Branch, Seattle, WA RG75.

<sup>82</sup> *Mourning Dove: A Salishan Autobiography*. 79-90.

<sup>83</sup> Spinden. *The Nez Perce Indians*. 257.

nearby to clean the body. At times, the white process was repeated.<sup>84</sup> Mrs. Caesar Williams, a Yakima tribal member wrote that, “It is a favorite custom among the northwestern tribes to take the test of the sweat house ordeal. This consists of two or more contestants for the championship, to enter a sweat house and see which can stand extreme heat for the greatest length of time with out[sic] evincing discomfort. I know an Indian of the Warm Springs tribe who has never met his equal in standing the torture of the sweat in this respect.”<sup>85</sup>

To most tribal members, the sweathouse was a sacred place. Individuals invoked the spirit of the sweat house and requested certain favors especially in areas of health, difficult undertakings, and success in important matters. In 1917, a woman from the Warm Springs tribe commented: “If you sweat properly, you will have no colds. A sweat will break a cold if taken at the right time. When you begin to cough, sweat about three times. I do not think it good after the cold is well set.”<sup>86</sup>

These traditional medicines were not able to alleviate the diseases which plagued the Native American populace. Diseases such as the Spanish Influenza spread quickly through the Pacific Northwest reservations. The impact of the influenza pandemic of 1918 differed from one reservation to the other. The Spokane experienced only two

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<sup>84</sup> Ibid.

<sup>85</sup> Mrs. Caesar Williams. “Yakima Tribal Customs: The Test of the Sweat House” April 1917, Folder: The Customs of the Yakimas. Omens. Item on the Winter, or “Earth House” of the Yakima and Wishom Tribes, 1909-1929, n.d. Box 44. Lucullus McWhorter Collection, Manuscript, Archives, and Special Collection, Cage 55.

<sup>86</sup> Ibid.

deaths. The Colville Reservation had ten times the mortality rate compared to Spokane.<sup>87</sup>

The Nez Perce experienced a series of outbreaks which last until 1922.<sup>88</sup>

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<sup>87</sup> Superintendent Morgan to Commissioner Sells, November 1, 1918 to December 31, 1918, Folder: Health and Sanitation, Box 217a Northwest Regional Archives, Branch, Seattle, WA RG 75.

<sup>88</sup> Superintendent of the Nez Perce Indian Agency to Commissioner of Indian Affairs. October 18, 1923. Folder: Superintendent Correspondence. ca 1916- 26. Box 035. Northwest Regional Archives, Branch, Seattle, WA RG 75.



## Chapter 2

Since their first encounter with Europeans, Native Americans have been plagued with various illnesses. Respiratory diseases such as tuberculosis, pneumonia, and influenza have claimed many lives. Native Americans found their ways of healing ineffective against these new forms of illnesses. As a result, the mortality of several native tribes remained high. In fact, the death rate exceeded the birth rate on several occasions.<sup>1</sup>

This thesis focuses on the influenza pandemic of 1918 –1919 in the Pacific Northwest and its effects on the Yakama, Spokane, Colville, and Nez Perce Reservations which were the more prominent ones. It discusses how the disease disrupted the social and economic development of these Pacific Northwest reservations. The study also analyzes the cultural and social issues that surrounded local Native American healthcare.

Various forms of influenza have developed over the years, affecting both white and Native American populations.<sup>2</sup> Influenza is generally, as we know now, an airborne pathogen that is spread through an individual’s coughing and mucus secretions. Most victims experience aches, chills, coughing, high fever, and sneezing. Most flu viruses are non-life threatening. On occasion, an influenza virus can evolve into a lethal disease.

In the nineteenth century, influenza was the primary killer of Native Americans, especially in the Pacific Northwest. Between 1827 and 1829, influenza pandemics spread through the Northwestern tribal communities killing hundreds. In 1832, a disease described as the “great mortality” devastated tribal villages located along the Columbia River and its various tributaries. Robert Boyd, author of *The Introduction to Infectious*

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<sup>1</sup> Clifford Trafzer. *Death Stalks the Yakama: Epidemiological Transitions and Mortality of the Yakama Indian Reservation, 1888-1964*. (East Lansing, MI: Michigan State University, 1997) 43.

<sup>2</sup> Alfred Crosby. *America’s Forgotten Pandemic* (New York, NY: Cambridge University Press, 2003) 5.

*Diseases Among the Indians of the Pacific Northwest*, suspects that the pandemic was pneumonia, which can be easily connected to influenza.<sup>3</sup> According to researchers, most viral influenzas kill their victims through pneumonia, a slow and painful process.<sup>4</sup>

Typically victims experience an array of symptoms for about ten days. The flu began with the inflammation of the mucosal membranes located in the throat, nose and larynx. Patients also developed other symptoms including high fevers, chills, rapid pulse, sore throat, headache, nausea, vomiting and enlarged neck glands.<sup>5</sup> According to one expert, this disease was divided into “two groups of symptoms: in the first place the constitutional reactions of an acute febrile disease – headache, general aching, chills, fever, malaise, prostration, anorexia, or vomiting; and in the second place, symptoms referable to an intense congestion of mucous membranes of the nose, pharynx, larynx, trachea, and upper respiratory tract in general and of the conjunctivae.”<sup>6</sup> Soon, a variety of other symptoms began appearing. Patients experienced hemorrhaging in the stomach, nose, eyes, and intestines.<sup>7</sup> Many developed pneumonia.<sup>8</sup> Lungs began filling with liquid. Patients developed cyanosis, a bluish tint around their mouths and skin indicating a lack of oxygen. They soon began coughing up blood and sputum.<sup>9</sup>

In the early twentieth century, physicians knew very little about communicable diseases such as tuberculosis, smallpox, and influenza. Medical technologies such as antibiotics or vaccines did not yet exist to fight influenza or pneumonia. Doctors could

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<sup>3</sup> Trafzer. *Death Stalks the Yakama*. 103.

<sup>4</sup> John Barry. *The Great Influenza: The Story of the Deadliest Pandemic in History*. (New York, NY: Penguin Books, 2004) 35.

<sup>5</sup> Diane Therese Putney, *Fighting the Scourge: American Indian Morbidity and Federal Policy, 1897-1928*. (Thesis)(Wisconsin: Marquette University, 1980) 204.

<sup>6</sup> Barry. *The Great Influenza*. 232.

<sup>7</sup> *Ibid*, 237.

<sup>8</sup> Crosby. *America's Forgotten Pandemic*. 5-8.

<sup>9</sup> *Ibid*.

only prescribe bed rest and quarantine the infected individual. Patients also were to be kept warm in ventilated rooms with plenty of sunlight.<sup>10</sup>

The influenza pandemic of 1918 – 1919 consisted of three waves which spread through the United States population. The first wave was a mild form of the disease and occurred in the summer of 1918. The second, in the fall of 1918, was lethal. The third, in the winter of 1919, caused a few deaths but lacked the lethality of the second wave.

The disease spread quickly, which amazed medical and public health officials. About 30 to 60 million people were killed world wide. In the United States, it was estimated that 549,000 people died.<sup>11</sup> Alfred Crosby, author of *America's Forgotten Pandemic*, states that the virus “killed more humans than any other disease in a period of similar duration in the history of the world.”<sup>12</sup> Minority groups, including Native American populations, had the greatest mortality rate. Between October 1, 1918, and March 31, 1919 the Office of Indian affairs estimated that about twenty-four percent of the reservation population contracted influenza.<sup>13</sup> From this group, nine percent of the victims died, which was four times higher than mortality rates in urban communities.<sup>14</sup>

The disease for tribal members first appeared in the Haskell Institute, an Indian boarding school located in Lawrence, Kansas. On March 21, 1918, Superintendent H.B. Pears reported to the Office of Indian Affairs that about 100 students had contracted the disease. In a short time, this number grew to 300 and included several deaths. The Public Health Services dispatched a senior surgeon to take charge of the situation. Health

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<sup>10</sup> Ibid, 7.

<sup>11</sup> Ibid, 206.

<sup>12</sup> Katrina Hindman, The Spanish Flu Epidemic – 90 years later. *The Yakima Herald Republic Online News*. (Accessed August 4 2011.) <http://www.yakima-herald.com/stories/2008/10/17/10-19-08-flu-for-life-in-the-nw/print> 2.

<sup>13</sup> Crosby, *America's Forgotten Pandemic*, 228.

<sup>14</sup> Ibid.

officials believed that the contagion originated from Camp Funston, a nearby army base, which housed about fifty-six thousand.<sup>15</sup> In its barracks, Camp Funston experienced about eleven thousand influenza cases, two hundred thirty seven pneumonia cases. However, the death toll was low, just thirty eight.<sup>16</sup>

On October 1, 1918, Congress instructed the Public Health Services to coordinate with other departments to combat the pandemic. The Public Health Services was provided with one million dollars. The surgeon general employed Cato Sells, the Office of Indian Affairs commissioner, who had no medical training, as a “Field Director” for public health on Indian Affairs.<sup>17</sup> Sells hired additional medical staff to work at reservations and schools. These new hires would be funded by the Public Health Services. As a result, Sells hired 362 temporary medical personnel.<sup>18</sup> In a letter, dated October 18, 1918, Commissioner Sells instructed superintendents of Indian Agencies to report weekly on the progress of the disease by telegram and to cooperate with local health officials.<sup>19</sup>

The additional funding provided by this joint effort was sorely needed. With the onslaught of the disease, medical funding from the “Indian Health Appropriation” for the year was depleted by November 1918. As a result, superintendents began requesting additional funding.<sup>20</sup>

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<sup>15</sup> Putney. “Fighting the Scourge.” 205.

<sup>16</sup> Barry. *The Great Influenza*. 96.

<sup>17</sup> Ibid; Sells, Cato. (2009). In P. Finkelman, & T. Garrison (Eds.), *Encyclopedia of United States Indian policy and law*. Washington, DC: CQ Press. Retrieved from [http://library.cqpress.com/ipi/eusipl\\_702.1](http://library.cqpress.com/ipi/eusipl_702.1)

<sup>18</sup> Putney. “Fighting the Scourge.” 206.

<sup>19</sup> Commissioner Sells to Superintendents, October 18, 1918, Circular No. 1477, Folder: Spanish Influenza Box 264, Northwest Regional Archives Branch, Seattle, WA, RG75. ; Cato Sells to Superintendent Carr, October 11, 1918, Folder: Spanish Influenza, Box 264 Northwest Regional Archives Branch, Seattle, WA RG 75.

<sup>20</sup> Putney. “*Fighting the Scourge*.” 206.

At the time, the majority of the nation's physicians and nurses were serving overseas in World War I. Commissioner Sells enlisted the Red Cross as they were already were involved in coordinating local efforts during the influenza epidemic. In conjunction with the U.S. Public Health Service, the Red Cross took a leading role in the growing crisis in the United States. This humanitarian organization mobilized all of its available nursing force and medical supplies. Local chapters began calling for additional volunteers to aid the effort.<sup>21</sup> They also organized "influenza committees," groups of local volunteers who mobilized resources and educated the public on the spread of the influenza.<sup>22</sup>

Public health officials also began sponsoring a national health campaign to educate both Native Americans and Whites about the disease. Health officials recommended plenty of bed rest and a balanced diet to individuals. People were to cover their coughs and sneezes with a handkerchief. They also needed to avoid crowds, spitting in public, and sharing of cups or towels. In a public statement, Surgeon General Rupert Blue, head of the Public Health Services, issued the following; "Influenza is a crowd disease. Therefore keep out of crowds as much as possible. . . . If you feel sick and believe you have "Spanish" influenza go to bed and send for the doctor. This is important. Don't get up too soon, your heart feels as tired as your legs and needs rest. In all health matters follow your doctor's advice, and obey the regulations of your local and state health officers. All that has been said above about "Spanish" influenza is true also of colds, bronchitis, pneumonia, and tuberculosis. Do your part to keep them away."<sup>23</sup>

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<sup>21</sup> Ibid ; Professor Diane Pearson, University of California and expert in Native American Medicine. casual conversation with author, July 21, 2011. (notes in the author's possession).

<sup>22</sup> Crosby. *America's Forgotten Pandemic*. 5.

<sup>23</sup> "Spread of the Spanish Influenza Menaces Our War Production." *Lewiston Tribune*, October 19, 1918, 1.

Effects of the influenza varied between tribal communities in the Northwest. The Spokane Reservation, located a few miles north of Spokane, Washington, was not badly affected. In his 1919 annual report, the superintendent of the Spokane Indian Agency reported that there were only a few cases of influenza among the 617 Spokane tribal members. These cases were quickly quarantined. The superintendent accounted for two deaths; “one girl dying in Spokane, and one man, returning home, died before our physician could be summoned [sic].”<sup>24</sup> During the outbreak, most tribal members remained close to their homes. Public gatherings were prohibited and the government school for reservation children was closed. The only side effect was the extension of the school year to make up for lost time.<sup>25</sup> During the pandemic, the mortality rate of this small reservation was only .3% compared to Spokane, the second largest city in Washington, which had a death rate of 1%.<sup>26</sup>

On the Yakama Reservation, located near the Yakama River, the situation was more severe. It is not known how many people died on the reservation, which housed about 2,933 people. In his report on January 31, 1919, the superintendent of the reservation, Don S. Carr, reported there were 835 influenza cases and 43 deaths between October and December.<sup>27</sup> In 2006, historian Clifford Trafzer reexamined the death certificates and reports. He stated that there were only 17 deaths among Yakima tribal

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<sup>24</sup> Annual Report of Superintendent, Spokane Agency (Wellpinit, WA), July 22, 1919. Section 2: Health, 9. Folder n.d.Box 510, Northwest Regional Archives Branch, Seattle, WA RG 75.

<sup>25</sup> Ibid.

<sup>26</sup> Kenneth Knoll. “When the Plague Hit Spokane.” *The Pacific Northwesterner*. 33, no. 1 (1989) 7.; United States Department of Health and Human Services “Washington” *The Great Pandemic: The United States in 1918- 1919*. (Accessed January 12, 2012) [http://1918.pandemicflu.gov/your\\_state/washington.htm](http://1918.pandemicflu.gov/your_state/washington.htm).

<sup>27</sup> Don S. Carr to Cato Sells, January 31, 1919. Circular No. 1494. Folder: Spanish Influenza Box 264, Northwest Regional Archives Branch, Seattle, WA, RG 75.

members which were the predominant group. However, Clifford Trafzer argues that the influenza deaths were “32 percent of all the deaths in that year.”<sup>28</sup>

Due to the rapid spread of the disease, the situation was chaotic, which made it difficult to keep accurate records. According to Alfred Crosby, author of *America’s Forgotten Pandemic*, doctors’ primary duty was caring for the living. Also, physicians constantly misdiagnosed the disease and pronounced it typhoid or malaria. Records produced by both the physician and the public health officer were duplicated. On the Yakama death certificates, physicians utilized a variety of labels for the disease, including the “Grippe,” “Spanish Influenza,” “Tuberculosis and Influenza,” “Influenza and Pneumonia,” “Influenza Meningitis”, and “Influenza Gastrointestinal.”<sup>29</sup> Keeping accurate medical records was never the Agency’s primary concern. Long distances on reservations and poor transportation hindered the reporting of deaths. As a result, records rarely contained complete information. The tribal members did not help the situation either. Many harbored bitter feelings due to the federal government’s control of their lives. Sometimes federal officials only found out about deaths during funerals.<sup>30</sup>

At the time, the healthcare facilities on the Yakima County were poorly funded and staffed. In the late nineteenth century, the federal government provided some medical relief for the reservation. However, the military facility at Fort Simcoe provided the majority of the health services. From 1915 to 1917, the superintendent of the agency, Donald Carr, hired field matrons to educate mothers and their families. This group of field nurses was managed by Esther M. Sprague, a field matron on the Yakama Reservation. Nevertheless, reservation still lacked funds to educate tribal members about

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<sup>28</sup> Trafzer. *Death Stalks the Yakama*. 139.

<sup>29</sup> *Ibid*, 103.

<sup>30</sup> *Ibid*, 85.

diseases and to build a hospital to house the sick. Years later, in 1928, sufficient funds would be appropriated to build a facility. As a result, the families in 1918 sought medical help from both medicine men and non-Indian physicians.<sup>31</sup>

On November 4, 1918, in a report to the Commissioner of Indian Affairs, Superintendent Carr explained that the reservation had been free from the pestilence until October 10, 1918. He reported “Since that date the disease spread with considerable rapidity all over the County. The town of Yakima has been closed for a week past and practically all business suspended. The disease seems to be clearing up in the town, but the health and authorities indicate that it is on the increase in the country.”<sup>32</sup> B.S. Ceswell, the Yakima County Health Officer, and Donald Carr, initiated a strict quarantine and closed businesses, schools, churches, and other public places. As had been the case with the Spokane, tribal members remained close to their homes. Individuals who showed symptoms of the disease isolated themselves in their homes. The superintendent reported “Physicians from adjoining towns are being called to treat all cases as fast as the Agency secures information of illness among Indians. The available medical force is limited and by virtue of the number of cases, very busy.”<sup>33</sup>

Despite these restrictions, individuals still tried to meet. On October 15, 1918, in a short letter to the superintendent, Mr. Stwire G. Waters, a member of the Yakama tribe, requested permission to hold a political meeting at the White Swan M.E. church. He stated that “My friends coming from Montana, Chief Red Fox and Chief Black Hawk both of them are well educated men, they going to make speeches about Freedom and

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<sup>31</sup> Ibid, 45-46, 156.

<sup>32</sup> Don S. Carr to Cato Sells November 4, 1918, Folder: Spanish Influenza, Box 264 Northwest Regional Archives Branch, Seattle, WA RG 75.

<sup>33</sup> Don S. Carr to Cato Sells, November 4, 1918, Folder: Spanish Influenza, Box 264, Northwest Regional Archives Branch, Seattle, WA RG 75.



Liberty are you allow us to met as Christian people do, or not.”<sup>34</sup> The letter did not provide any specific details on this meeting, which perhaps enabled Stwire to defy the quarantine. In his response, Superintendent Carr granted permission but warned Mr. Waters about keeping the gathering brief. He stated: “I want, however, to call attention to the fact that gatherings of this kind should not be held so long as the grippe or influenza is so prevalent throughout the reservation nor would it be wise to have open air meetings until health conditions improve.”<sup>35</sup> On November 1918, Carr reported to the Commissioner of Indian Affairs, “There is such an epidemic of grippe among school children that the public schools in the County were closed the first weeks of October.”<sup>36</sup>

On the outskirts of the Yakama reservation, both the young and the elderly began utilizing sweatlodges along the Yakima River during the epidemic. In the *Yakima Daily Republic*, the white editor criticized the lodges’ use, calling it “superstitious” and “primitive.”<sup>37</sup> What amazed the editor, the young, who were well educated, continued to use this form of medicine. At the time, white society believed that the younger generation, with their years of educational studies and indoctrination into white western society, would turn away from their traditional customs and medicine.<sup>38</sup>

The city of Yakima, located on the reservation, was also in quarantine. The *Yakima Morning Herald* reported that stores, schools, libraries and other public gatherings were closed. Most nurses in the area were reluctant to take care of influenza patients due to fear of contracting the disease themselves. St. Elizabeth Hospital, the first

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<sup>34</sup> Stwire Waters to Superintendent Carr, October 15, 1918, Folder: Spanish Influenza, Box 264 Northwest Regional Archives, Branch, Seattle, WA RG 75.

<sup>35</sup> Superintendent Carr to Stwire Waters, October 19, 1918, Folder: Spanish Influenza Box 264 Northwest Regional Archives, Branch, Seattle, WA RG 75.

<sup>36</sup> Trafzer. *Death Stalks the Yakama*, 139.

<sup>37</sup> “22 Yakima Indians have Succumbed to the Influenza.” *Yakima Daily Republic*. November 9, 1918.

<sup>38</sup> *Ibid*.

medical facility in the Yakima Valley, which was supervised by the Sisters of Providence, denied admission to all victims of influenza. The manager of this Catholic hospital stated that “We cannot accept patients who have Spanish influenza, on the account of exposing other patients.”<sup>39</sup> As a result, influenza victims remained in their homes during the early stages of the epidemic. Finally, in October 1918, the Hospital consented and opened its doors to influenza patients. Health officials also converted St. Michael Episcopal Church’s rectory into a temporary hospital. Bedding was either donated by other churches or bought from the hospital. The city alone had about 6,000 cases and 120 deaths.<sup>40</sup> According to the Census Bureau, the city had a mortality rate of .1%. Records do not indicate if these deaths were tribal members.<sup>41</sup>

In the nearby community of Ahtanum, the *Yakima Daily Republic* reported, several Native Americans returned home to Pendleton, Oregon after three of their tribal members died from influenza. Among this group of Native Americans, B.S Ceswell, the county health officer, found that one man, along with two babies, succumbed to the disease. In addition, the health officer reported that another child died, “presumably of diarrhea, according to the foreman of the ranch on which the Indians were camping.”<sup>42</sup> The *Yakima Daily Republic* also reported that “The Indians left there intending to return

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<sup>39</sup> Katrina Hindman, The Spanish Flu Epidemic – 90 years later. *The Yakima Herald Republic Online News*. <http://www.yakima-herald.com/stories/2008/10/17/10-19-08-flu-for-life-in-the-nw/print> (accessed August 4 2011.)

<sup>40</sup> Ibid.

<sup>41</sup> U.S. Census Bureau. *Mortality Rates, 1910- 1920*. (Washington D.C. : Government Printing Office, 1923) 312.

<sup>42</sup> “Five Cases Spanish Influenza Appear: Indians in Ahtanum among whom Disease was reported have gone to Oregon.” *Yakima Daily Republic*. October 17, 1918, 3. ; Don S. Carr to Cato Sells November 4, 1918, Folder Spanish Influenza, Box 264 Northwest Regional Archives Branch, Seattle, WA RG 75.

to their home in Pendleton, Ore, and it was current that two of their number had died since leaving here, although there was no verification of the statement.”<sup>43</sup>

The reservation’s boarding school was affected by the disease as well. On November 4, 1918, Carr reported; “There was such an epidemic of grippe conditions among school children that the public schools of the County were closed the first week of October. Having this in mind, the Boarding School was not opened.”<sup>44</sup> Prior to this letter, Commissioner Cato Sells sent a telegram to all reservations on October 11, 1918 warning of the dangers of influenza to boarding schools. He recommended that buildings be kept between sixty to seventy degrees and with good ventilation. Students needed to avoid gatherings or intermingling with their peers. Faculty needed to cooperate with health officials and contracted physicians who would determine if unnecessary school activities needed to be suspended. In addition, the faculty was to assist the medical staff in caring for students with the disease.<sup>45</sup>

The boarding school hospital, managed by nurse Alice C. Peairs, treated twenty-nine influenza, two influenza pneumonia, and one influenza-meningitis cases among the student population between October, and December of 1918. From this number, two deaths were reported. The staff also nursed several faculty members and their families, one of these cases died. The hospital’s services also extended into several Native American homes, seven of these cases died. According to the report, the school’s

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<sup>43</sup> Ibid.

<sup>44</sup> Don S. Carr to Cato Sells, November 4, 1918, Folder: Spanish Influenza, Box 264, Northwest Regional Archives Branch, Seattle, WA RG 75.

<sup>45</sup> Cato Sells to Superintendent Carr, October 11, 1918, Folder: Spanish Influenza, Box 264 Northwest Regional Archives Branch, Seattle, WA RG 75.

dormitories became temporary hospitals in order to handle the overflow. Afterwards, the hospital and quarters were fumigated and cleaned.<sup>46</sup>

Students who were housed in boarding schools off the reservation were also affected by the influenza. Cecilia Nye, a Yakama tribal member, died at the Chemawa Indian School, located in Salem, Oregon. The school's superintendent, Harwood Hall, wrote to Cecilia's mother, Grace Nye;

It was brought here at first by new students coming in and it spread rapidly until we had about 250 cases. The entire school stopped its regular activities and devoted itself absolutely to the care and nursing of the sick. Out of the 250 cases, we lost a comparatively few. Among the number was your daughter. Absolutely everything possible was done in the way of medical care and nursing. The sick was never left alone for one minute, someone was administering to their needs and looking after them and I want you to feel that in this sickness that your daughter has had as good attention as she possibly could have had in any hospital or home... This disease which has taken thousands upon thousands throughout the country was no worse here than elsewhere. It was not due to Chemawa or its location. It was a general disease everywhere[sic].<sup>47</sup>

According to her death certificate, Cecilia died on October 23, 1918 from "Spanish Influenza and Tuberculosis," at the age of 16.<sup>48</sup> Other students from the Yakama Reservation were living in Chemawa during the pandemic. On October 23, 1918, in a letter to superintendent of the Yakama Agency, Hall wrote "... Alex Frank Teopil is now well and getting along nicely."<sup>49</sup> Daisy Coddling, head nurse of the school, recorded 150 cases and thirteen deaths in the school hospital records.<sup>50</sup> One of these

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<sup>46</sup> "Monthly Hospital Report for Yakama Boarding School," October, November, December 1918. Folder: Hospital Reports, Box 264 Northwest Regional Archives Branch, Seattle, WA RG 75.

<sup>47</sup> Harwood Hall to Superintendent of the Yakima Indian Agency, October 29, 1918. Folder: Chemawa Student Files 5133, Cecilia Nye. Box 68. Northwest Regional Archives, Branch, Seattle, WA RG 75.

<sup>48</sup> Harwood Hall to Superintendent of the Yakima Indian Agency, October 23, 1918. Folder: Chemawa Student Files 5133, Cecilia Nye. Box 68. Northwest Regional Archives, Branch, Seattle, WA RG 75.

<sup>49</sup> "Cecilia Nye." October 23, 1918. Folder Death Certificates, 1917-1930. Box 276. Northwest Regional Archives, Branch, Seattle, WA RG 75.

<sup>50</sup> "Register of Salem Indian School Hospital." Folder: Hospital Record, 1917 -1924. Box 5 Northwest Regional Archives, Branch, Seattle, WA RG 75

deaths was Alex Marks, a Nez Perce tribal member, who died on October 25, 1918, two days after Cecilia.<sup>51</sup>

By the end of December 1918, the Yakima reservation's White Swan district reported about three hundred nine cases and sixteen deaths. The Toppenish District estimated three hundred twenty-two influenza cases and twenty deaths. The Wapato District reported two hundred four cases and seven deaths.<sup>52</sup> The reservation, which housed 2,933 individuals, experienced a total death toll of 43 and 835 influenza cases.

The Colville Reservation, located south of the Canadian border in Washington State, experienced numerous cases of influenza. As with the Yakama, the death toll remains uncertain on the Colville Reservation, which housed 2,518 individuals.

According to Commissioner Sell's annual report, the death toll was seventy five.<sup>53</sup> In January 1919, the superintendent of the Colville Agency, Fred Morgan, reported five hundred thirty-two cases and sixty-six deaths from "November 1 and December 31, 1918".<sup>54</sup> However, at the end of the crisis, in January 1919, in his request for statistical information from medical staff, Morgan stated "Of course, I realize that there were many cases of influenza among the Indians where a doctor was not called. In so far as you can, furnish, the number of Indians that were afflicted in your district[sic]."<sup>55</sup> In the surrounding areas of Ferry and Okanogan County, the overall mortality rate for the two

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<sup>51</sup> n.d. "Chemawa Indian School Cemetery." May 21, 2002, email attachment from Archivist Ken House at Northwest Regional Archives, Branch, Seattle, WA RG 75.

<sup>52</sup> Don S. Carr to Cato Sells, January 31, 1919. Circular No. 1494. Folder: Spanish Influenza, Box 264, Northwest Regional Archives Branch, Seattle, WA RG 75.

<sup>53</sup> Robert Boyds. "Demographic History until 1990." *Handbook of North American Indians: Plateau, Vol 12*. Deward E. Walker, (ed) (Washington, D.C: Government Printing Office, 1998) 478.

<sup>54</sup> Superintendent Morgan to Commissioner Sells, November 1, 1918 to December 31, 1918, Folder: Health and Sanitation, Box 217a Northwest Regional Archives, Branch, Seattle, WA RG 75.

<sup>55</sup> Superintendent Morgan to Drs. Lane, McRae, Johnston, January 4, 1919 Folder:Health and Sanitation, Box 217a Northwest Regional Archives, Branch, Seattle, WA RG 75.

counties in 1918 was 1 % and .8 %, which included the influenza deaths.<sup>56</sup> These figures were less in comparison to Colville's 2% mortality rate due to influenza.<sup>57</sup>

The disease arrived on the Colville Reservation, in early October 1918 spread quickly. Ronald McRae, the contract physician, along with a few medical personnel, found it difficult caring for the growing number of the sick and dying.<sup>58</sup> In November, W. Lawson, head of the Inchelium, one of the four districts on the reservation, reported that there were "five deaths in the last three days" along with forty recorded patients in the last two days.<sup>59</sup> As had happened in the Yakama reservation, the location of temporary medical staff in the region proved to be difficult.<sup>60</sup> Family members had to care for each other. In a letter to Commissioner Sells, the superintendent noted several volunteers, Catherine Pichette, Angeline Aleck, and Ekitulx, wife of little Paul, who nursed patients.<sup>61</sup> Eventually, the reservation managed to hire Lisa Hanson, Joseph Noel, Eliza Hall, Isabel Hall, and Nona Mitchell, as nurses and nursing assistants.<sup>62</sup>

In Colville's Inchelium district, about one hundred forty seven contracted the disease and twenty three died, between November 1 and December 31, 1918.<sup>63</sup> The names of the deceased included Thomas Aleck, Verbina Bean, John Camille, Charles

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<sup>56</sup> U.S Census *Mortality Rates 1910- 1920*. (Washington D.C.: Government Printing Office, 1923) 228- 229.

<sup>57</sup> Office of Indian Affairs. *Annual Report of the Commissioner of Indian Affairs*.

<sup>58</sup> Supervisor in Charge to Indian Affairs, November 1, 1918, Folder: Health and Sanitation, Box 217a Northwest Regional Archives, Branch, Seattle, WA RG 75.

<sup>59</sup> Lawson to Supervisor in Charge, November 11, 1918, Folder: Health and Sanitation, Box 217a Northwest Regional Archives, Branch, Seattle, WA RG 75.

<sup>60</sup> Supervisor in Charge to Indian Affairs, November 1, 1918, Folder: Health and Sanitation, Box 217a Northwest Regional Archives, Branch, Seattle, WA RG 75.

<sup>61</sup> Superintendent to Commissioner, November 1, 1918 Folder: Health and Sanitation, Box 217a Northwest Regional Archives, Branch, Seattle, WA RG 75.

<sup>62</sup> Fred Morgan to Indian Office, December 2, 2011, Folder: Health and Sanitation, Box 217a Northwest Regional Archives Branch, Seattle, WA RG 75.

<sup>63</sup> "Jurisdiction of Colville Agency" November 1, 1918 to December 31, 1918, Folder Health and Sanitation, Box 217a Northwest Regional Archives, Branch, Seattle, WA RG 75.

Camille, Caroline Edwards, and George Herron.<sup>64</sup> In his letter to the superintendent, Dr. Ronald McRae, the district's contracted physician reported that "the situation is serious in my district and I believe it will sweep all through it from one end to the other...I have so far about thirty five cases recorded and more to see tomorrow."<sup>65</sup> Medical staff also found that the medical supplies was being depleted and requested additional material.<sup>66</sup> In another letter to Colville's superintendent, dated December 5, 1918, Dr. McRae, the reservation's contract physician, wrote: "I am unable to state when the epidemic is over and no one in the profession seems to be able to through any light on the matter. It is going through some places the second time. There seems to no immunity and from the disease and those who have had it never knows when they are out of danger from a relapse and the pneumonia that complicates it[sic]."<sup>67</sup>

In the Okanogan district, Dr. C.W. Lane, another contract physician cared for two hundred forty six cases between November 1 and December 31, 1918.<sup>68</sup> From this number, twenty four passed away. W.A.Talbert, the head of this district, converted his office into a temporary hospital.<sup>69</sup> In the small town of Omak, the matron's quarters became another temporary hospital.<sup>70</sup> The San Poil District, which was under the management of C.E. Andres and Dr. Walter S. Johnson, another contract physician, held

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<sup>64</sup> "Deaths Inchelium District" n.d. Folder: Records of Death and Reports of Birth 1919-20 Box 260a Northwest Regional Archives Branch, Seattle, WA RG 75.

<sup>65</sup> Dr. McRae to W.G. West, November 9, 1919, Folder Contract Physician, Hunters, Box 199a Northwest Regional Archives Branch, Seattle, WA RG 75.

<sup>66</sup> Dr. McRae to W.G. West, November 9, 1919, Folder Contract Physician, Hunters, Box 199a Northwest Regional Archives Branch, Seattle, WA RG 75.

<sup>67</sup> Dr. McRae, to Superintendent Fred Morgan, December 5, 1918, Folder: Health and Sanitation, Box 217a Northwest Regional Archives, Branch, Seattle, WA RG 75.

<sup>68</sup> "Jurisdiction of Colville Agency" November 1, 1918 to December 31, 1918. Folder Health and Sanitation, Box 217a Northwest Regional Archives, Branch, Seattle, WA RG 75.

<sup>69</sup> "Talbert Has a Hospital," *Omak Chronicle*, November 29, 1919, 4.

<sup>70</sup> Fred Morgan to Indian Office, December 2, 2011, Folder: Health and Sanitation, Box 217a Northwest Regional Archives Branch, Seattle, WA RG 75.

seven cases and two deaths. Dr. Walter S. Johnson also cared for the Nespelem district which had 76 cases and 5 deaths between November 1 and December 31, 1918.<sup>71</sup>

The reservation's North Half district had about forty six cases and twelve deaths. In this district, the Red Cross established a temporary hospital on October 21, 1918 in Marcus, Washington. This temporary medical facility was open for about six weeks and treated thirty five patients. From these patients, W.H. Seibert, the head of the North Half district, stated that out of these thirty five individuals, fourteen were Native Americans. The Red Cross utilized the Goss Hospital, a closed medical facility which was donated by Dr. C.W. Goss from Newport, Washington and re-opened it. Other donations included money, food, and bedding from the surrounding community and prominent individuals. The *Marcus Messenger* reported that a trained nurse was hired for four weeks at the salary of \$1. 50 per day. The Red Cross relied on volunteers to perform the majority of the responsibilities.<sup>72</sup>

Tribal members were cared for at home or at temporary emergency hospitals. Mourning Dove, author of *Coyote Stories*, was an influenza patient for two weeks at a hospital located in Marcus, Washington. She eventually wrote about her ordeal in a manuscript, entitled *The Red Cross and The Okanogans*. This document provides a detailed account of the influenza pandemic among the Okanogan Native Americans and the Red Cross's relief effort. Mourning Dove stated, "The Indian population of Kelly Hill and adjacent valley would no doubt have been wiped out by the epidemic had it not been for the Red Cross."<sup>73</sup> She also noted several individuals who assisted tribal members

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<sup>71</sup> "Jurisdiction of Colville Agency" November 1, 1918 to December 31, 1918. Folder: Health and Sanitation, Box 217a Northwest Regional Archives, Branch, Seattle, WA RG 75.

<sup>72</sup> "Red Cross closes Hospital" *Marcus Messenger*. December 13, 1918, 1.

<sup>73</sup> *Mourning Dove: A Salishan Autobiography*. (Lincoln, NB: University of Nebraska Press, 1990) 190.



including Dr. Parker, the attending physician, and head of the area Red Cross. He was joined by his wife and others. Mourning Dove also wrote that “The lady members of this humane body devoted themselves to the dusky patients who filled the wards of the hospital. Day and night they relaxed not their vigils, but cared for the sick with all the tender patience of the true mother and sister.”<sup>74</sup> J.S. Lane, the assistant deputy sheriff became a voluntary ambulance driver and searched homes in order to locate victims. Most were found in single rooms alongside other dead family members. Utilizing his own car, Lane transported these individuals to the “Sick House of the white man.”<sup>75</sup> However, there were certain individuals who were still suspicious of the Red Cross’s intent and remained in their homes. Mourning Dove stated: “To these, such aid and comport (comfort) was rendered as possible under the conditions[sic].”<sup>76</sup>

In his report to the superintendent, Dr. Parker said that twenty- two Native Americans were treated at the Marcus Hospital, that number included Mourning Dove, Peter Smith, Mrs Helen Grant, children of Joseph Tuintaskette, Leo Tuintaskette, his wife, and their children.<sup>77</sup> From this group, there was one death, a minor, who died the night she was admitted to the hospital.<sup>78</sup> In another report, the doctor recorded that there were sixteen cases and eight deaths among the Native Americans from Kelly Hill who refused admittance into the Marcus Hospital. In his report, Parker noted that he “visited

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<sup>74</sup> Ibid.

<sup>75</sup> Ibid.

<sup>76</sup> Ibid.

<sup>77</sup> T. F Parker to Superintendent Morgan, December 20, 1918, Folder: Health and Sanitation, Box 217a Northwest Regional Archives, Branch, Seattle, WA RG 75; “Colville Indians in Acc. With Dr. T.F. Parker” January 4, 1919, Folder: Health and Sanitation, Box 217a Northwest Regional Archives, Branch, Seattle, WA RG 75.

<sup>78</sup> T.F Parker to Fred C. Morgan, Superintendent, January 11, 1919, Folder: Health and Sanitation, Box 217a Northwest Regional Archives, Branch, Seattle, WA RG 75.

several of these Indians in the company of J.S. Lane, on October 27<sup>th</sup>, in an effort to induce them to come to the Marcus Hospital.”<sup>79</sup>

Dr. Parker and Mr. Lane also traveled to Inchelium district, where the majority of the influenza cases were located. Here they visited victims of the disease in their homes and also tried to recruit volunteers to assist the Red Cross. With the assistance of the Indian agent, Dr. Parker and Mr. Lane converted the local dance hall into a hospital and divided it into two wards. Mourning Dove reported that many lives were saved due to the efforts of the Red Cross and Indian Agency.<sup>80</sup>

There were others who aided the local Native Americans. Missionaries worked alongside the Red Cross volunteers. On November 18, 1918 the Mother Superior from the Ward Mission, also known as the St. Francis Regis, went to Marcus Hospital to care for victims.<sup>81</sup> In her manuscript, Mourning Dove credited the Mother Superior for saving a young boy’s life. Also, the mission’s “Father Schyler” visited the hospital “sometimes on foot and untiring.”<sup>82</sup> On one occasion, Father Schyler discovered that three Native Americans were sick with pneumonia. One of them was Florence Arnold, a ten year old who died at 4:30 am the next day, on October 29.<sup>83</sup> In her manuscript, Mourning Dove described how “The Catholic Indians wanted to be right with the white man’s God before leaving for the Happy Hunting Grounds, with its visions of wild freedom which finds

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<sup>79</sup> T.F Parker to Fred C. Morgan, Superintendent, January 11, 1919, Folder: Health and Sanitation, Box 217a Northwest Regional Archives, Branch, Seattle, WA RG 75.

<sup>80</sup> *Mourning Dove: A Salishan Autobiography*. 190-191.

<sup>81</sup> Jesuit, Oregon Province. “St. Francis Regis Mission’ House Diaries” *The Pacific Northwest tribes mission collection of Oregon Province Archives of the Society of Jesus*. (Wilmington, DE : Scholarly Resources, 1987) Reel 23.

<sup>82</sup> *Mourning Dove: A Salishan Autobiography*. 190.

<sup>83</sup> Jesuit, Oregon Province. “St. Francis Regis Mission’ House Diaries” *The Pacific Northwest tribes mission collection of Oregon Province Archives of the Society of Jesus*. (Wilmington, DE : Scholarly Resources, 1987) Reel 23.

place in the mind of every tribesman, however Christianized.”<sup>84</sup> Unfortunately, Mourning Dove gave no indication if Father Schyler gave the victims their last rites or heard their confessions.

Missionaries also felt the effects of the influenza. St. Francis Regis mission, an impoverished mission, established by the Jesuits, served a small group of Catholic Native Americans. It also managed a school for boys and a boarding school for girls, which were supervised by the Sisters of Providence. In the mission’s House Diaries, entries noted the closing of churches and their schools on October 20, 1918. Three days prior, the missionaries sent the students home. During the pandemic, Father Schuler and his colleague, Father Boll made several sick calls to the homes of Joe Smith, Charlie Seymours, Francis Camilles, and the Marcus hospital. On several occasions, these missionaries administered last rites. They also made several return visits, finding the victims dead.<sup>85</sup> On October 25, 1918, the diary entry recorded “A sick call to Boyds; to Charley Smith. Willie and Peter Smith and two women very sick. All remain extreme uncertain; Father Schuler goes from there to Joe Seymour, where he found three people dead; John Camille, Albert Seymour, and a baby[sic].”<sup>86</sup> Jesuits held several funerals, including one for Anthony Ruggrevo, who was a “half-blood.”<sup>87</sup>

As in the Yakama reservation, tribal members on the Colville reservation used the sweathouse for a cure, but this procedure was criticized by local newspapers. On

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<sup>84</sup> Mourning Dove: *A Salishan Autobiography*. 190.

<sup>85</sup> Jesuit, Oregon Province. “St. Francis Regis Mission’ House Diaries” *The Pacific Northwest tribes mission collection of Oregon Province Archives of the Society of Jesus*. (Wilmington, DE : Scholarly Resources, 1987) Reel 23.

<sup>86</sup> Jesuit, Oregon Province. “St. Francis Regis Mission’ House Diaries” *The Pacific Northwest tribes mission collection of Oregon Province Archives of the Society of Jesus*. (Wilmington, DE : Scholarly Resources, 1987) Reel 23.

<sup>87</sup> Ibid.

November 11, 1918, *the Spokesman Review* reported “Most of the deaths so far have been caused by the Indian cure-all treatment of placing the body in a high state of perspiration in the numerous Indian sweat huts and the patient then jumping into the ice cold water of the streams. Even the better educated younger generation seems unable to break away from the superstition of this treatment for illness and several have perished as a result.”<sup>88</sup>

In her manuscript, Mourning Dove described how locals drank Sage Tea to battle the influenza. She wrote “We also found that Mentholated Okanogan sage brush was an infallible remedy for the Flu. Made into a strong tea and drinking it hot, affects a cure within three or four days with no after attack of neumonia (pneumonia). It is a vile smelling, nauseating liquid.”<sup>89</sup> According to Jim Meuninck, author of Medicinal Plants of North America, the Sage or Sagebrush is a shrub that grows to 7 feet and grows in arid areas of Idaho, Montana, Washington, and Oregon. The plant’s leaves are wedge shaped and are wide at the tip. The plant blooms between the months of July and October. According to Meunick, this plant is used as both food and medicine. According to Meunick, Sage Tea treated a variety of ailments including “stomachaches, sorethroats, coughs, colds, and bronchitis.”<sup>90</sup> The seeds were used in Liqueurs to provide a fragrance.<sup>91</sup>

During the Influenza epidemic of 1919, arguments about compensation arose between agency officials and physicians for reservations. Dr. McRae, a contract physician for the Indian Affairs, threatened to resign from the Colville Reservation if he

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<sup>88</sup> “Flu Attacking Colville Indians: Perish From Treatment in Sweat Huts, Followed by Ice-Cold Bath.” *Spokesman-Review*. November 28, 1918. n.d.

<sup>89</sup> Mourning Dove: *A Salishan Autobiography*. 192.

<sup>90</sup> Jim Meuninck. *Medicinal Plants of North America*. (Giulford, CT: Globe Pequot Press,2008) 142.

<sup>91</sup> *Ibid*.

was not promoted to the status of special physician. As a special physician, he would receive a salary of \$200 per month which as \$100 dollars more than his normal payment.<sup>92</sup>

Another argument arose between the Red Cross and the Indian Affairs about paying for Red Cross medical Assistance.<sup>93</sup> In fact, Dr. Parker, head of the local Red Cross, sent a list of Native Americans who still had medical accounts, with expenses ranging from 35 to 10 dollars. The superintendent, in his response to Parker, argued that it did not make sense for this organization to be reimbursed by Office of Indian Affairs. The superintendent then suggested that the Native American patients pay for their own medical treatment.<sup>94</sup> In the end, most influenza victims, who were already destitute, found themselves paying for their own treatment. On January 4, 1919, in a letter to her friend, Lucullus McWhorter, Mourning Dove wrote “I am sure shamed of myself about not been able to send Mr. Gibson something for Xmas. I didn’t even give any presents to my own people this year, I had to much expense, and having the honerable influ, emptyed my bank account to a finish[sic].”<sup>95</sup>

Tribal members also encountered difficulty burying their dead during the 1918 influenza pandemic. On December 28, 1918, in a report to the Commissioner of the Indian Affairs, the Superintendent of the agency wrote:

There are occasional instances where Indians on the Colville  
Reservation have become victims of the epidemic of Influenza which

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<sup>92</sup> Ronald McRae to Superintendent, nd Folder: Health and Sanitation Box 217a Northwest Regional Archives, Branch, Seattle, WA RG 75.

<sup>93</sup> Commissioner to Superintendent, October 31, 1918, Manuscript, Archives, and Special Collection, Pullman WA. Cage 3012.

<sup>94</sup> W. H. Seibert to Fred C. Morgan, January 1, 1918. Folder: Health and Sanitation Box 217a Northwest Regional Archives, Branch, Seattle, WA RG 75.

<sup>95</sup> Mourning Dove to Lucullus McWhorter, January 4, 1919, Folder: (Correspondence Miscellaneous), 1916-1933,n.d. Box 46. Lucullus Virgil McWhorter Papers, 1848-1945. Manuscript, Archives, and Special Collections. Pullman, WA Cage 55.

has spread thru this country in the case of Sam Edwards, an Indian who died without trust funds on deposit at this office, there is no money for defraying the necessary funeral expense. Please advise me whether it would be proper to submit a public voucher on the form prescribed for use of the Public Health Service to be paid in connection with the expense of combating the epidemic on this Reservation[sic].<sup>96</sup>

Despite the efforts of the Red Cross and the government, Native Americans still harbored bitter feelings towards white men. Prior to the flu's effect on the tribe, some of the Native Americans believed that the influenza was the judgment on the White Man's greed. In Mourning Dove's manuscript, many of the Okanogans claimed "It is the white man's sore throat disease which is killing him off. The white man dies easily. It will never hurt us."<sup>97</sup> Across the Canadian border, fellow tribal members of the Okanogans were dying in the hundreds. Entire families were devastated by the disease. Dead bodies were rotting in the same room with the invalids. In her manuscript, Mourning Dove criticized the Canadian government, usually known for its relief work with the natives, for not aiding the Canadian Okanogans. In addition, she criticized the Red Cross, an international humanitarian organization, for not aiding the Okanogans and accused them of being apathetic. However, Mourning Dove assumed that this lack of aid was due to the little publicity the Canadian Okanogans received.<sup>98</sup>

At the time, many Pacific Northwest Native Americans were forced to send their children to boarding schools located in other parts of the country such as Phoenix and Haskell. During the pandemic, institutions such as the Cushman Boarding School, located in Tacoma, Washington, provided an excellent environment for the spread of the disease. On October 19, 1918, the first death at the Cushman school was Celestine Pichette from

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<sup>96</sup> Superintendent of Colville Agency to Commissioner of Indian Affairs, December 28, 1919. Folder: Health and Sanitation Box 217a Northwest Regional Archives, Branch, Seattle, WA RG 75.

<sup>97</sup> *Mourning Dove: A Salishan Autobiography*. 192.

<sup>98</sup> *Mourning Dove: A Salishan Autobiography*. 190.

the Colville Reservation. The school's superintendent reported that Celestine had run away to Seattle, Washington, where he contracted the disease. On October 24, 1918, Alice La Fleur, another Colville student, died from unknown causes. The officials could not determine if her death was the result of scarlet fever or influenza. On October 26, 1918, Thomas Curlew, another student, contracted "bronchial pneumonia" and died.<sup>99</sup> Other deaths included Joe Simpson, and Ernest Crofoot from Colville.<sup>100</sup> In a letter to J.E. Crofoot, father of Ernest, Superintendent Hammond reported that Crofoots' children at the school were ill from the disease. They recovered except for Ernest, the youngest, who contracted pneumonia. On November 8, Hammond wrote to Ernest's mother, stating "There was a strong hope all the time that we would be able to save him. The disease, however, affected his kidneys to such a degree that we lost him."<sup>101</sup>

On the Nez Perce Reservation, located in northern Idaho, the death toll and number of influenza cases remain uncertain. In his 1919 report, the superintendent for the Nez Perce reservation, reported that "...there were a large number of cases of this disease. The death rate was not so high as we feared it would be."<sup>102</sup> The Superintendent also enclosed a letter with the report, dated July 14, 1920 in which he stated "... the death rate exceeded the births by 37 the past year, but this high death rate was due to largely to an epidemic of influenza."<sup>103</sup> Records on the Nez Perce from this era are scarce. In an email on September 30, 2011, Francis Mary Ronan, an archivist from the National

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<sup>99</sup> Charles Robert. "The Cushman School Indian Trade School and World War I." *American Indian Quarterly* 11, no.3 (1987) 228.

<sup>100</sup> Superintendent Hammond to Fred Morgan, November 27, 1918, Folder: Records of Death and Reports of Births Box 260a Northwest Regional Archives, Branch, Seattle, WA RG 75.

<sup>101</sup> Robert. "The Cushman School Indian Trade School and World War." 228.

<sup>102</sup> 1919 Annual Report of Fort Lapwai Indian Agency, Folder: Annual Reports FLA (1919) Box 35, Northwest Regional Archives, Branch, Seattle, WA RG 75.

<sup>103</sup> Superintendent to Cato Sells, July 20, 1920, Folder: Annual Reports FLA (1919) Box 35, Northwest Regional Archives, Branch, Seattle, WA RG 75.

Archives Record Administration(NARA) in Washington, D.C., stated “...the interesting thing is that they have nothing at all about the 1918 flu epidemic, and the only file in there close to those years was one file for 1918, and it was about a camp. There was a dearth of anything about the 1916 to 1930, only a couple of files[sic].”<sup>104</sup> Furthermore, in NARA’s Seattle branch, few records can be located.

The Office of Indian Affairs took a census on the Nez Perce Reservation on June 30, 1919. Between June 30, 1918 and June 30, 1919, seventy- seven deaths were recorded including 22 minors and 55 adults. This mortality rate had doubled the 42 deaths from the previous fiscal year.<sup>105</sup> Unfortunately, the Nez Perce were afflicted by a myriad of other diseases including tuberculosis, trachoma, and pneumonia along with influenza, so a strict influenza count cannot be established.

At the time, the Nez Perce Reservation was comprised of Nez Perce, Latah, and Clearwater Counties. Tribal members lived around or near the rural towns of Culdesac, Lapwai, Kamiah, Nez Perce, and Kooskia and intermingled with white settlers. Some members began to settle near Lewiston, Idaho and Clarkston, Washington which were two industrial towns located on the outskirts of the reservation. According to *Lewiston Morning Tribune*, the influenza visited the region in early October 1918. A quarantine in the counties was issued by health officials, Dr. John N. Alley from the Nez Perce county and Dr. Susan Bruce from Lewiston, Idaho. By November, 1918, Lewiston, Idaho had 774 influenza cases. By the end of the pandemic, the city with a population of 6,574 had 53 influenza deaths with a 1% mortality rate. The town of Nez Perce had about eighteen

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<sup>104</sup> Mary Francis Ronan. “Fort Lapwai Sanitarium.” e-mail to author. September 30, 2011.

<sup>105</sup> United States Indian Affairs Bureau. Indian Census Rolls, 1885- 1940: Fort Lapwai. Reel 4C.



deaths which amounted to a 2% fatality rate. Local Red Cross chapters were active in assisting these local communities.<sup>106</sup>

In Lapwai, a town dominated by Native Americans, schools, businesses, and other public gatherings were closed due to the quarantine. The Fort Lapwai High School, which was the largest high school on the reservation and subsidized by both local and federal funds, was closed at different intervals. The school was finally reopened in November 21, 1918. Before being reopened, the school was fumigated and cleaned. The school also was going to extend its hours in order to compensate for lost time.<sup>107</sup> By December 12, 1918, the *Lewiston Morning Tribune* reported that “The influenza is on the wane in Lapwai, but we “knock on wood” when we mention it. Very few new cases have developed since the report a week ago. Martin Carlson had a light attack and has recovered. The Thomas family has had four cases of late but the father is up and able to take care of Mrs. Thomas and one of the children who is at home. The baby is with its grandmother at the Agency and is just recovering.”<sup>108</sup>

Kamiah, a modernized town dominated by the Nez Perce, was also affected. The village council of the town became the local health board. It issued a 6:30 pm curfew for children and warned parents about their children socializing and intermingling in congested areas. In addition, they prohibited individuals from overcrowding and loitering in stores. A temporary hospital was established in the Odd Fellows Hall. In the *Kamiah Progress*, the editor reported, “With everything shut up tight, there is very little to write about. Nothing doing of any nature – no school, no church, no lodge gatherings, no

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<sup>106</sup> “Worker’s Come to Red Cross.” *Lewiston Morning Tribune*, October 24 1918 n.d.; Daniel Miller *A Little Patch of Idaho* (Steeley Printing and Binding, 2007) 156.; Jennifer K. Bauer. *Lewiston Morning Tribune*. May 16, 2009, n.d.

<sup>107</sup> “Lapwai Resumes” *Lewiston Morning Tribune*. November 22, 1918, n.d.

<sup>108</sup> “Fewer Cases at Lapwai” *Lewiston Morning Tribune*. December 12, 1918, n.d.

society activities, no picture shows, no entertainments everyone scared to go a block away from home and no visitors coming or going[sic].”<sup>109</sup> For about four months, Kamiah was closed at different intervals. The public school had not been opened in eleven weeks. It was noted that extra school work was required in order to make up for the lost time. During quarantine, Kamiah experienced only a few deaths in comparison to the neighboring towns of Nez Perce and Kooskia.

Missionaries within the vicinity were affected as well. The St. Joseph Mission, also referred to as the Slickpoo Mission, consisted of Nez Perce converts and was led by the elderly Jesuit, Father Cataldo.<sup>110</sup> The mission’s House Diaries provided a daily account on the disease’s progress. On October 11, 1918, the Jesuits received word that influenza was in the country. The following day, the missionaries were told that “gathering in churches are forbidden, they may pray outside.”<sup>111</sup> The Church’s bell also could not be rung for services. Mass attendance was poor between October and January. Father Lajorie, from the nearby Lapwai Parish, who assisted Father Cataldo, spent several weeks away visiting various influenza victims in their homes and giving them last rites. Funeral services were held for George Happy Smith, James Tuyihin and Petronilla Elizabeth, daughter of Alexis James Tuyihin. They were buried quietly on account of the epidemic.<sup>112</sup> On December 2, 1918, the *Lewiston Tribune* reported that “At Slickpoo,

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<sup>109</sup> Virginia Woods Meyers, *Peaceful Valley: The Story of Kamiah’s Early Years*. (Spokane, WA: Luminary Media Group, 1999) 124.

<sup>110</sup> Edwin Thompson “Joseph M. Cataldo, S.J. and St. Joseph’s Mission,” *Idaho Yesterdays* 18, no. 2 (1974) 27.

<sup>111</sup> Jesuits, Oregon Province. “St. Joseph Mission’s House Diaries” *The Pacific Northwest Tribes Mission Collection of Oregon Province Archives of the Society of Jesus*. (Wilmington, DE : Scholarly Resources, 1987) Reel 21.

<sup>112</sup> Jesuits, Oregon Province. “St. Joseph Mission’s House Diaries” *The Pacific Northwest Tribes Mission Collection of Oregon Province Archives of the Society of Jesus*. (Wilmington, DE : Scholarly Resources, 1987) Reel 21.

where the Sisters' mission is located, ten new cases had developed... had been practically free from the disease up to this time[sic].”<sup>113</sup>

The mission's boarding school and day school, which were supervised by the Sisters of St. Joseph, were also affected. The boarding school housed about sixty Native American children along with forty nine white ones. Twenty four white children attended the Day school.<sup>114</sup> During the pandemic, several Native American parents took their children home. Sister Alberta, who taught at the mission, was sent to Pasco, Washington where several other sisters were ill. The mission's *House Diaries* also noted that several sisters, who also worked in the nearby St. Joseph's Hospital, in Lewiston, Idaho, died from the influenza. On October 22, 1918, Mother Angelica, who was visiting the mission, was called to Lewiston where one of their members, Sister Marie Evangelista Ward, a 36 year old nun, who had contracted influenza from a patient. Sister Maria Evangelista died the next day at 5 pm and was buried quietly. Mother Angelica also contracted the disease and died on January 3, 1919 at 2 pm. It was noted that only a few people attended the funeral service due to fear of the influenza. Mother Angelica was buried with Sister Marie Evangelista, Sister Marie Clement, Sister Joseph, and three other members of their order in the "Sister's Graveyard" located in Lewiston, Idaho.<sup>115</sup>

The medical assistance rendered to the Nez Perce during the epidemic was poor in comparison to other reservations. According to the superintendent, the Reservation's sanitarium, which was designed to serve children with tuberculosis, was the only medical

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<sup>113</sup> "Day's Report 22: at Culdesac and Lapwai." *Lewiston Morning Tribune*, December 3 1918, 7.

<sup>114</sup> Jesuits, Oregon Province. "1918 Census of St. Joseph Mission" *The Pacific Northwest Tribes Mission Collection of Oregon Province Archives of the Society of Jesus*. (Wilmington, DE : Scholarly Resources, 1987) Reel 21.

<sup>115</sup> Jesuits, Oregon Province. "St. Joseph Mission's House Diaries" *The Pacific Northwest Tribes Mission Collection of Oregon Province Archives of the Society of Jesus*. (Wilmington, DE : Scholarly Resources, 1987) Reel 21.

facility for the Nez Perce located in Lapwai, Idaho. The Nez Perce who resided in the vicinity were the only ones who benefited from the medical services provided by the government. However, the Superintendent insisted that the sanitarium school was more than capable to meet any crisis. The sanitarium was staffed with three physicians, who specialized in tuberculosis. These medical professionals provided medical attention to both white and tribal individuals outside of the school.<sup>116</sup> According to another source, one of the physicians, Dr. Alley, visited homes both day and night.

In this same report, the superintendent also stated that there was no need for a temporary hospital. However, the Indian agent mentioned that there was a need for a field matron, a field nurse to Native Americans, who rendered medical assistance to people in remote areas. It appears that the position was vacant for a while.<sup>117</sup>

Nez Perce who lived on the far side of the reservation were forced to seek medical attention from local white practitioners in local towns. Dr. C.H. Bryan, a contract physician of fifty-three years in Kamiah, Idaho, served local tribal members.<sup>118</sup> Other tribal members sought other physicians and paid with their own money. The Indian Agent considered this situation to be beneficial for the Native Americans.<sup>119</sup>

In the United States, John Barry, author of The Great Influenza: The Story of the Deadliest Pandemic in History, the high numbers of deaths were due to the wide spread of the disease and the Native Americans' lack of immunity. At the time, people including non-Indian physicians were desperate to save lives and used any form of medical

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<sup>116</sup> 1919 Annual Report of Fort Lapwai Indian Agency, Folder: Annual Reports FLA (1919) Box 35, Northwest Regional Archives, Branch, Seattle, WA RG 75.

<sup>117</sup> 1919 Annual Report of Fort Lapwai Indian Agency, Folder: Annual Reports FLA (1919) Box 35, Northwest Regional Archives, Branch, Seattle, WA RG 75.

<sup>118</sup> Meyers, *Peaceful Valley*: 258

<sup>119</sup> 1919 Annual Report of Fort Lapwai Indian Agency, Folder: Annual Reports FLA (1919) Box 35, Northwest Regional Archives, Branch, Seattle, WA RG 75.

treatment they thought might help. Across the state, doctors began injecting patients with a typhoid vaccine, hoping that it would increase their immune system. In Montana, another doctor developed an experimental treatment on six patients. Two died from the experiment.<sup>120</sup> On the Colville Reservation, Benetol, a germicide was utilized as a prevention and cure for Influenza. On November 10, 1918, in a letter, Horace Burrett, a mineral examiner from Keller Washington wrote “Benetol is the best germicide known to the medical fraternity and assures its use as directed is harmless.”<sup>121</sup> As a preventive, the drug was used in gargling or spraying of the throat. For influenza patients, it was applied on the bare skin similar to Vicks vapor rub.<sup>122</sup>

Like the Native Americans, some Whites turned to herbal medicines and homeopathic techniques. Gerlsemium, also known as Yellow Jasmine, was the foremost herbal drug employed to combat the disease. Other drugs utilized Poison Ivy, Echinacea, and Fox Glove.<sup>123</sup>

What were the after affects of the disease on the Native American population in the Pacific Northwest and its culture? Author John Barry argues that the disease reduced the life span of its victims by several years. Survivors of the disease developed side-effects and became susceptible to other ailments. Also, additional influenza outbreaks occurred through the 1920’s, 1930’s, and 1940’s. However, the mortality rates of these outbreaks weren’t as high as in 1918.<sup>124</sup>

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<sup>120</sup> Barry. *The Great Influenza*. 353.

<sup>121</sup> Horace R. Burrett to Mr. West, November 10, 1918, Folder: Health and Sanitation, Box 217a Northwest Regional Archives, Branch, Seattle, WA RG 75.

<sup>122</sup> Ibid.

<sup>123</sup> Kathy Abascal. *Herbs & Influenza: How Herbs used in the 1918 Flu Pandemic can be effective today*. (Vashon,WA:Tigana Press, 2006) 74- 134.

<sup>124</sup> Barry. *The Great Influenza*. 378-382.

### Chapter 3

Following 1918, the after effects of the influenza continued to afflict society and its citizens for several years. Symptoms ranged from neurological disorders to physical ailments. Phillips Howard, author of Black October, argued that “Post-flu debility and lassitude were by no means unusual. Recovery was often slow and uneven ... ‘impaired vitality’, ‘breathless’, ‘suffered palpitations’, ‘temporarily forgetful, deaf, blind or bald’, ‘anaemia’, ‘post influenza melancholia’ and ‘several cases of suicide were attributed to this post-‘ flu melancholia’ with others ‘left with health permanently impaired by, for example deafness, weak lungs, heart trouble and a susceptibility to other diseases such as phthisis, tuberculosis, parkinsonism, nephritis, meningitis and encephalitis lethargica[sic].”<sup>1</sup>

The United States Public Health Department issued a warning to tribal members and survivors of the Flu about being susceptible to tuberculosis. The United Kingdom’s Public Health Department was seeing an increase of tuberculosis in influenza patients. Rupert Blue, Surgeon General of the United States Public Health department warned, “... people whose resistance had been weakened by the influenza are peculiarly susceptible to tuberculosis.”<sup>2</sup> The United States Public Health Department also warned that people should not diagnose themselves but have their lungs examined by a professional, “several times at monthly intervals.”<sup>3</sup> In addition, patients were encouraged to build up their immunity through healthy living, good food, and fresh air.<sup>4</sup>

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<sup>1</sup> Niall Johnson. *Britain and the 1918-19 Influenza Pandemic* (New York, NY: Routledge, 2006) 6.

<sup>2</sup> “Advice to Flu Convalescents.” *Lewiston Tribune*. December 5, 1918, n.d.

<sup>3</sup> *Ibid.*

<sup>4</sup> *Ibid.*

Tuberculosis was already prevalent in the United States prior to 1918. Also known as the “white plague,” and “consumption,” this respiratory disease was caused by bacillus entering a victim’s lungs. Once inside, the disease could remain dormant for a number of “months, years, or even decades.”<sup>5</sup>

In the early twentieth century, Pacific Northwest Tribes especially in the Yakima, Nez Perce, and Colville Reservations experienced high mortality rates from tuberculosis. In 1913, it was estimated that whites held a 12.1 percent mortality rate due to tuberculosis, while Native Americans had 35.4 percent.<sup>6</sup> During the epidemic, the younger generation contracted tuberculosis more readily in comparison to their elders. With the increased death rate among the young, avoid formed with in the Native American society with the consequent loss of traditions, language, and cultural identity were lost.<sup>7</sup> On the Nez Perce Reservation, according to Superintendent Oscar H. Lipps, “At least seventy-five percent of the Nez Perce Indians have tuberculosis in some form... hardly a family ... is free from the disease.”<sup>8</sup> According to the data from Yakima Reservation Death Certificates, the disease claimed about one hundred sixty-four victims between 1911 and 1964. According to Clifford Trafzer, the tuberculosis did not reach its peak until the 1920’s. Due to the Yakima agency’s poor record keeping and inconsistencies with death certificates, Trafzer explained, this assessment can only be assumed<sup>9</sup> (See Appendices).

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<sup>5</sup> Elizabeth James. “Tuberculosis, Health Care, and the Assimilation on the Nez Perce Reservation.” *Oregon Historical Quarterly* 112, no. 2 (2011) 142-143.

<sup>6</sup> Ibid.

<sup>7</sup> Clifford Trafzer. “Coughing Blood: Tuberculosis Deaths and Data on the Yakama Indian Reservation, 1911- 64.” *Canadian bulletin of medical history Bulletin* vol. 15 (1998) 251-255.

<sup>8</sup> Elizabeth James. “Tuberculosis, Health Care, and the Assimilation on the Nez Perce Reservation.” 145.

<sup>9</sup> Trafzer. “Coughing Blood.” 255.

Medical research also has linked neurological complications to influenza ranging from lack of energy to schizophrenic episodes. During the influenza epidemic, a victim's brain could hemorrhage at times due to lesions around the capillaries and thus fluid could become trapped in the skull cavity.<sup>10</sup> As a result, many victims developed a form of delirium. In her autobiography, Mourning Dove describes experiencing delirium during her hospitalization at Marcus Hospital. In a letter to her friend, Lucullus McWhorter, Mourning Dove complained "I am out of feds, and will have to go to town and get some grociers ... This is my first time to be out since I came home from the hospital. I think I am all O.K. now[sic]."<sup>11</sup>

Researchers also believed that the influenza was responsible for a number of suicides. On November 6, 1918, in a letter written to Walter G. West, W.H Seibert from Republic, Washington, near the Colville Reservation reported "There were nine deaths among the Indians. Three of the Smith family, three of the Semoe, Charles Semoe was taken to the Insane Asylum. One of the Pichette family, Florence Arnold, and Mrs. Wm Miller[sic]."<sup>12</sup>

After 1918, the influenza in many populations lost its virulence. According to John Barry, two natural processes happened. Like all viruses, the influenza began to mutate, in this case it lost its potency. After the second wave, populations developed certain immunity to the disease. The second wave of the disease lasted about six to eight

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<sup>10</sup> John Barry. *The Great Influenza: The Story of the Deadliest Pandemic in History*. (New York, NY: Penguin Books, 2005) 370-375.

<sup>11</sup> Mourning Dove to Lucullus McWhorter. December 14, 1918. Folder: (Correspondence Miscellaneous), 1916-1933, n.d. Box 46. Lucullus Virgil McWhorter Papers, 1848-1945. Manuscript, Archives, and Special Collections. Pullman, WA. Cage 55.

<sup>12</sup> W.H. Seibert to Walter G. West, Supervisor in Charge, November 6, 1918. Folder: Health and Sanitation. Box 217a. Northwest Regional Archives, Branch, Seattle, WA RG 75.



weeks, from the first case in October to the end of the pandemic in December in the United States.<sup>13</sup>

The third wave, which occurred in the winter of 1919 on the Colville and Yakima reservations, was not as deadly.<sup>14</sup> The Yakima reservation's mortality rate was low in the third wave in comparison to the 1918 influenza. In 1919, only two tribal Yakimas passed away from influenza.<sup>15</sup> The Colville reservation experienced similar circumstances. On January 24, 1919, in a letter to the Superintendent Fred Morgan, Chas Lawson from the Inchelium district wrote:

It looks as though the influenza has hit us again. We have a number of cases and one death to date. School has been closed, that is our Inchelium School has been closed and the ban placed on all gatherings. The Day school has not been closed as yet but this is due to the fact that no sickness has developed in that section of the country. Every measure known for the prevention of the spread of this disease is being practiced and it is to be hoped that we may be able to check it before it gets much of a start. The Health Officer at Republic has been notified and we are working together to check the thing before we have the same conditions as existed before.<sup>16</sup>

The letter also contained a handwritten note, "Anna Doolittle Paul, died 1-22-1919, Pneumonia following influenza."<sup>17</sup> On her death certificate, Anna Paul, a Colville tribal member died at the age of 26.<sup>18</sup> On January 30, 1919, in a response to Lawson's letter, the Superintendent wrote "I note from your letter of January 24, 1919, that the influenza has again appeared in the Inchelium district, I regret to learn this and trust that

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<sup>13</sup> Barry. *The Great Influenza*. 370-375.

<sup>14</sup> Barry. *The Great Influenza*. 370-375.; Superintendent Don S. Carr to Commissioner of Indian Affairs Cato Sells, January 31, 1919. Folder: Spanish Influenza. Box 264. Northwest Regional Archives, Branch, Seattle, WA RG 75.

<sup>15</sup> Clifford Trafzer and Robert McCoy. *Forgotten Voices: Death Records of the Yakama, 1888-1964*. (Lanham, Maryland: Rowman & Littlefield Pub. 2009) 111.

<sup>16</sup> Chas Lawson to Fred C. Morgan, January 24, 1919, Folder: Health and Sanitation. Box 217a. Northwest Regional Archives, Branch, Seattle, WA RG 75.

<sup>17</sup> Ibid.

<sup>18</sup> Anna Doolittle Paul's Death Certificate, January 22, 1919. Folder: Records of Deaths and Reports of Births. Box 260a Northwest Regional Archives, Branch, Seattle, WA RG 75.

the epidemic will not be serious this time. With the prompt steps you have taken to prevent its spread, I am sure you will bring about good results.”<sup>19</sup>

Cusick, a small town located a few miles east of the Colville Reservation, experienced the third wave. On January 16, 1919, the Ward Mission’s House Diaries noted “Sick call to Cusick: 10 Indians died through this week by influenza.”<sup>20</sup> Entries in the month of January 1919 described Fr. Schuler making several sick calls to Usk, Cusick, and the North Half of the reservation. On January 20, 1919, the diary contained “Fr. Schuler visits some more sick . . . near Usk around the River. Influenza does a great havoc in this country among whites and Indians.”<sup>21</sup> On February 10, 1919, the entry stated “Fr. Schuler went to Cusick: 3 more Indians had died there by the Flu. 2 boys and 1 married woman.”<sup>22</sup> However, other areas on the Colville reservation did not experience any sickness or deaths in the third wave. On February 26, 1919, Dr. Ronald McRae stated “The District here is without a case of Flue[sic] so far as I know and there has not been any for some time.”<sup>23</sup>

Not all Native American populations experienced the same low mortality rate in the third wave. On the Nez Perce reservation, the influenza continued to impact the population for some time. On April 14, 1922, the *Lewiston Tribune* reported that “The Nez Percés were on the increase until the influenza epidemic in 1918. but for the past three years they have not quite held their own. . . It is believed, however, that influenza

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<sup>19</sup> Superintendent to C.W. Lawson, January 30, 1919. Folder: Health and Sanitation. Box 217a. Northwest Regional Archives, Branch, Seattle, WA RG 75.

<sup>20</sup> Jesuit, Oregon Province. “St. Francis Regis Mission’s House Diaries.” *The Pacific Northwest tribes mission collection of Oregon Province Archives of the Society of Jesus* (Wilmington, DE : Scholarly Resources, 1987) Reel 23.; Cusick is a small town located on the Kalispel Indian Reservation, a small subagency of Colville Reservation, which is ninety-two miles east of the reservation.

<sup>21</sup> Ibid.

<sup>22</sup> Ibid.

<sup>23</sup> Dr. Ronald McRae to Superintendent Fred C. Morgan, February 26, 1919 Folder: Contract Physician. Box 199a. Northwest Regional Archives, Branch, Seattle, WA RG 75.

and tuberculosis will claim fewer victims in the years ahead. Because those Indians who have adopted the white man's house are learning the need for ventilation and are using other proper precautions against pulmonary afflictions[sic].<sup>24</sup>

Writing to the Commissioner of Indian Affairs, the Superintendent of the Fort Lapwai Agency, provided statistical evidence of the decreased population. In 1918, the population had forty two deaths and twenty four births, which amounted to an eighteen decrease. In 1919, the population's death toll reached seventy-seven with only twenty-eight births, which diminished the total by forty-nine. In 1920, the population experienced fifty-eight deaths and twenty-one births, which reduced it by thirty-seven. In 1921, the Nez Perce had fifty deaths and twenty-one births, as a result decreased by twenty-nine. In 1922, there were sixty-two deaths and forty-five births, which totaled a eighteen decrease. In 1923, there were thirty-seven deaths and twenty three births, which created a loss of fourteen in numbers. The superintendent finally totaled the number to a one hundred sixty-four reduction in population. This statistical information is useful but it doesn't differentiate between tuberculosis and influenza cases. However, the evidence shows a dramatic increase in the mortality rate which peaked in 1919.<sup>25</sup>

At the end of this letter, the superintendent reported "I cite these statistics as proof that the Nez Perces are a vanishing people. Last year when I called these facts to their attention and suggested the need of a small hospital to be located at the Agency where it could be conducted in connection with the Sanatorium at small expense, loud protests to the use of tribal funds for this purpose went up from them and the matter was dropped."<sup>26</sup>

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<sup>24</sup> "Nez Perces on Increase." *Lewiston Morning Tribune*, August 20 1922. n.d.

<sup>25</sup> Superintendent to Commissioner of Indian Affairs. October 18,1923. Folder: Superintendent's Correspondence. Box 035. Northwest Regional Archives, Branch, Seattle, WA RG 75.

<sup>26</sup> *Ibid.*

On January 3, 1919, the *Lewiston Morning Tribune* reported that in Lapwai:

School began here on Monday after a ten weeks recess and was interrupted Wednesday by the New Year's holiday, resuming again Thursday. Because of the prevalence of a few cases of influenza in town a ban was placed on pupils attending the New Year's dance, with the result that several of the older pupils are out of school the rest of the week and possibly longer. It is reported that one of the pupils who attended now has the influenza. If that is true, it is liable to be some time before the rest can return because of the likelihood of bringing the epidemic into the schools. It was decided at a meeting of the board on Thursday to place a ban on pupils attending the picture show. These are precautionary measures necessary because of the threatened spread of the epidemic and consequent closing of the schools again[sic].<sup>27</sup>

The majority of flu evidence was derived from the St. Joseph Mission House Diaries. The second wave of the influenza outbreak appeared to have lasted until February 1919. Poor church attendance was still being recorded. According the Mission's "Record of Interments," Raymond George's mother, Tillie and Halfmoon Elizabeth passed way on February 8, 1919 and February 18, 1919.<sup>28</sup> In February 24, 1919, the entry stated "Fr. Cataldo during his Mass in the Fathers' chapel got a little sick and some Sisters present got scared and telephoned. In the evening, Dr. Alley and Fr. Lajorie came to see the sick man, but he was well already."<sup>29</sup> On March 5 1919, the entry wrote "Ash-Wednesday. Many Indians. Deo Gratias. Many Comm[sic]."<sup>30</sup> This last record indicates that life was returning to normal. Quarantine was no longer in effect and the people gathered for social meetings.

As was the case with the Colville, sporadic outbreaks continued to impact the Nez Perce. In May of 1919, the House Diaries indicate that the influenza returned to the Nez

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<sup>27</sup> "News of Lapwai: Schools Resume, Cannot attend the Deaths." *Lewiston Morning Tribune*. January 3, 1919, 1.

<sup>28</sup> St. Joseph/Slickpoo Mission. "Record of Internments." Folder: Research Center Reference files. Box n.d. Nez Perce National Historical Park. National Park Services, Lapwai, ID.

<sup>29</sup> Jesuits, Oregon Province. "St. Joseph Mission's House Diaries." *The Pacific Northwest tribes mission collection of Oregon Province Archives of the Society of Jesus* (Wilmington, DE : Scholarly Resources, 1987) Reel 21.

<sup>30</sup> Ibid.

Perce Reservation. On May 17, 1919, the mission reported “Sunday. No High-mass: some children and sisters are sick with influenza.” On May 18, 1919, the record stated “Sunday influenza continues: one little girl is very sick.”<sup>31</sup> On May 25, 1919, diaries revealed “the sick little girl died here, and after the funeral, the body was taken to Lapwai for burial in the family graveyard. Her name was Mary Delia Leplawood Elispalia.”<sup>32</sup> According to the mission’s “Records of Internments,” the little girl died of influenza.<sup>33</sup>

In 1920, the disease returned to Nez Perce during the winter. The January 25, 1920, an entry stated “... Fr. Lajories writes, he cannot come for his retreat, (as he had intended), because the Influenza is all over, and there are many sick calls, and many deaths.”<sup>34</sup> On February 1, 1920, “...We tell the people that day pupils will not come to school till the Influenza is gone. Some Indians took their children away.”<sup>35</sup> The February 6, 1920, an entry stated “Influenza has sent about forty whites and thirty Indians to eternity.”<sup>36</sup> The following year, in 1921, the Slickpoo Mission’s “Records of Interment” recorded burying three parish members, Janette James Tieushini, Joseph Webb, and Bertha Waptihikar, who were victims of the flu.<sup>37</sup> The next year, on March 2, 1922, the St. Joseph Mission’s House Diaries reported “Ash Wednesday – Few People in account of influenza over the country. Fr. Lajorie goes off there are many people sick at Lapwai

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<sup>31</sup> Jesuits, Oregon Province. “St. Joseph Mission’s House Diaries.” *The Pacific Northwest tribes mission collection of Oregon Province Archives of the Society of Jesus* (Wilmington, DE : Scholarly Resources, 1987) Reel 21.

<sup>32</sup> Ibid.

<sup>33</sup> St. Joseph/Slickpoo Mission. “Record of Internments.” Folder: Research Center Reference files. Box n.d. Nez Perce National Historical Park. National Park Services, Lapwai, ID.

<sup>34</sup> Jesuits, Oregon Province. “St. Joseph Mission’s House Diaries.” *The Pacific Northwest tribes mission collection of Oregon Province Archives of the Society of Jesus* (Wilmington, DE : Scholarly Resources, 1987) Reel 21.

<sup>35</sup> Ibid.

<sup>36</sup> Ibid.

<sup>37</sup> St. Joseph/Slickpoo Mission. “Record of Internments.” Folder: Research Center Reference files. Box n.d. Nez Perce National Historical Park. National Park Services, Lapwai, ID.

and surroundings.”<sup>38</sup> On March 11, the House Diaries continued “Mrs. Galles Elizabeth Feucht died at the Mission.”<sup>39</sup> She was buried on March 13. According to the mission’s “Records of Internment,” Mrs. Feucht was another victim of the influenza along with Amanda Rose Lawyer, Peter Slickpoo, and John Lawyer.<sup>40</sup>

Sporadic outbreaks of influenza continued to visit the reservations through the 1920’s and 1930’s. On February 9, 1920, in a letter to McWhorter, Mourning Dove wrote: “Just a line tonight to find out if you are still in the land of the living with all this flu rageing [sic] the country again, and killing many off many of our people again. We are clear of it so far. but for how long. I don’t know.”<sup>41</sup> According to the Colville Death records, the 1918 influenza claimed the strong and healthy members of the reservations. In the 1930’s and 1940’s, the influenza returned to claim the elderly, infants, and infirm. For instance, Mary McDonald died from Influenza at the age of sixty-four, on April 8, 1936. It appears that Individuals who already had tuberculosis easily contracted Influenza and died. Robert O’ Brien died on October 9, 1929, at the age of thirty-five from tuberculosis with complications from Influenza. John Pakootas died at the age of twenty-one on October 13, 1932 from Influenza. He had been previously weakened by tuberculosis.<sup>42</sup>

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<sup>38</sup> Jesuits, Oregon Province. “St. Joseph Mission’s House Diaries.” *The Pacific Northwest tribes mission collection of Oregon Province Archives of the Society of Jesus* (Wilmington, DE : Scholarly Resources, 1987) Reel 21.

<sup>39</sup> Ibid.

<sup>40</sup> St. Joseph/Slickpoo Mission. “Record of Internments.” Folder: Research Center Reference files. Box n.d. Nez Perce National Historical Park. National Park Services, Lapwai, ID.

<sup>41</sup> Mourning Dove to Lucillus McWhorter, February 9, 1920, Folder: (Correspondence Miscellaneous), 1916-1933, Box 46. Lucillus Virgil McWhorter Papers, 1848-1945. Manuscript, Archives, and Special Collections. Pullman, WA Cage 55.

<sup>42</sup> “Death Certificates.” Folder: n.d. Box: 458 Vital Statistics, 1914-43, Northwest Regional Archives, Branch, Seattle, WA RG 75.

In 1929, another outbreak of influenza occurred with in the Native American populace especially in the Southwest. On January 5, 1929, the *Spokesman Review* wrote “Edgar B. Merritt, assistant commissioner of Indian Affairs testifying before a House Subcommittee in support of a deficiency appropriation of \$30,000 to meet the situation, declared the epidemic was principally in the southwest, but was spreading northward, and that as many as 800 children from once school had been in hospitals at Phoenix, Ariz.”<sup>43</sup> Based on the Death Certificates, a few influenza deaths occurred during the epidemic on the Colville and Yakama reservations, mostly among the young, elderly, or the infirm. Wa-win-not, registered as a full-blooded Colville, died at the age of 86 on January 6, 1929. Tinaway, another Colville member died at the age of 73 on March 17, 1929. Mary Tiekarson died at the age of 88 on November 4, 1928. Other causes of death such as tuberculosis, pneumonia, and measles were listed along with influenza.<sup>44</sup>

On the Colville Reservation, Wa-Win-Tip-Yah-Le-Ka-Set, the widow of Chief Joseph died during the 1929 outbreak. On January 31, 1929, the *Wenatchee Daily World* wrote “At the Colville Indian Agency yesterday morning Wa-Win-Tip-Yah-Le-Ka-Set, the last surviving widow of the Nez Perce warrior, Chief Joseph, died. She came to the Colville reservation with the party of 118 Nez Percés, headed by Chief Joseph, arriving in June of 1885... Wa-win-tip-yah-le-ka-set was close to the century mark in age, finally succumbing to general infirmities after an attack of influenza.”<sup>45</sup> January 14, 1929, the

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<sup>43</sup> “Flu Hits Indians Hard: Uncle Sam Asked for \$30,000 to Fight Epidemics.” *Spokesman-Review*. January 05, 1929., n.d (Accessed March 1, 2012) [http://content.wsulibs.wsu.edu/cdm-all/item\\_viewer.php?CISOROOT=/clipping&CISOPTR=6822&CISOBX=1&REC=1](http://content.wsulibs.wsu.edu/cdm-all/item_viewer.php?CISOROOT=/clipping&CISOPTR=6822&CISOBX=1&REC=1).

<sup>44</sup> “Death Certificates.”. Folder: n.d. Box:458, Vital Statistics, 1914-43, Northwest Regional Archives, Branch, Seattle, WA RG 75.

<sup>45</sup> “Wa-Win-Tip-Yah-Le-Ka-Set, Chief Joseph’s Last Widow, Succumbs to Attack of “Flu.”. *The Wenatchee Daily World*. January 31, 1929, n.d. (Accessed March 1, 2012) [http://content.wsulibs.wsu.edu/cdm-all/item\\_viewer.php?CISOROOT=/clipping&CISOPTR=10109&CISOBX=1&REC=2](http://content.wsulibs.wsu.edu/cdm-all/item_viewer.php?CISOROOT=/clipping&CISOPTR=10109&CISOBX=1&REC=2).

*Spokane Chronicle* reported “A visit to all Indian homes of the Colville Agency district now accessible gave assurance that the recent epidemic of influenza among the Indians left no serious complications from which a normal recovery is not being made. The examination was made by Dr. Fred Barteau of the Fort Spokane hospital at Miles, who has spent the last week at the agency.”<sup>46</sup>

In September 12, 1931, the Ward Mission’s House Diaries reported one of the local priests wrote “Off for Cusick. Many sick with Flu. Had two baptisms, one wedding and the sick call.”<sup>47</sup> Unlike the 1918 entries, the House Diaries didn’t indicate any quarantine or limitations on other social activities. In addition, there was no notice of a burial or death due to influenza.<sup>48</sup> According to Dr. Ronald McRae’s “Services on the Colville Indian Reservation Inchelium District for the Month of February 1932, “the doctor attended to thirteen cases of influenza which included Alma Toulou, Eliza Burchand, Sophia Manual, Williams Seylor, Ruth Seylor, Herman Bourgeau, Thomas Hall, Nina Foster, Elmer Peone, Evangeline Alex, Mary Olive Seylor, Johnny Pichette, and Arther Fry. Like the Ward Mission documents, the Inchelium records did not indicate any deaths due to influenza.<sup>49</sup>

As in Colville, influenza outbreaks continued to occur on the Nez Perce Reservation and the surrounding communities. On February 23, 1936, another relative of

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<sup>46</sup> “State History. Native Americans. Epidemics.” *Spokane Chronicle*. January 14, 1929. n.d. (Accessed March 1, 2012) [http://content.wsulibs.wsu.edu/cdm-all/item\\_viewer.php?CISOROOT=/clipping&CISOPTN=6800&CISOBX=1&REC=9](http://content.wsulibs.wsu.edu/cdm-all/item_viewer.php?CISOROOT=/clipping&CISOPTN=6800&CISOBX=1&REC=9).

<sup>47</sup> Jesuit, Oregon Province. “St. Francis Regis Mission’s House Diaries.” *The Pacific Northwest tribes mission collection of Oregon Province Archives of the Society of Jesus* (Wilmington, DE: Scholarly Resources, 1987) Reel 23.

<sup>48</sup> Jesuit, Oregon Province. “St. Francis Regis Mission’s House Diaries.” *The Pacific Northwest tribes mission collection of Oregon Province Archives of the Society of Jesus* (Wilmington, DE : Scholarly Resources, 1987) Reel 23.

<sup>49</sup> McRae, Roderick Donald, 1864-1942. “Services on the Colville Indian Reservation Inchelium District for the Month of February 1932”. February 1932. Folder: McRae, Roderick Donald, 1864-1942. Box n.d. Manuscript, Archives, and Special Collections. Pullman, WA, Cage 3012.



Chief Joseph, his niece, Mrs. Susie Davis died from influenza at the age of 75. The *Lewiston Morning Tribune* reported “Mrs Susie Davis, 75, niece of Chief Joseph, noted Indian warrior . . . passed away at her home near Kamiah today after an illness of two weeks. Death resulted from pneumonia super-induced by an attack of influenza.”<sup>50</sup> In 1935, the *Lewiston Tribune* reported another Nez Perce death due to influenza. On April 3, 1935, the paper wrote that “Silas Whitman, 70, outstanding member of the Nez Percés and among the most influential members of Indian tribes of the northwest, passed away Sunday at his home at Ahsahka from a complication of ailments. Several weeks ago Whitman went to Hot Lake Oregon, for the benefit of his health. He returned about two weeks ago somewhat improved but was attacked by influenza, which developed into pneumonia. Before fully recovering he contracted smallpox and his death resulted.”<sup>51</sup>

Due to the onslaught of diseases, a void began forming in Native American culture. Individuals both young and old were dying along with their traditions, religious beliefs, and customs. Clifford Trafzer, author of *Death Stalks the Yakama*, argues that a depression formed, which added to the further deterioration of the Pacific Northwest tribes’ mental and physical health.<sup>52</sup>

Since the 1930’s, influenza and its various strains have continued to plague both Native Americans and Whites. Over the years, many scientists have tried to discover the origin of the 1918 influenza, resulting in different theories. Some scholars, including Alfred Crosby, author of *America’s Forgotten Pandemic*, surmise that the disease

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<sup>50</sup> “Mrs. Susie Davis Taken By Reaper.” *Lewiston Tribune* February 23, 1936. n.d. (Accessed March 1, 2012) [http://content.wsulibs.wsu.edu/cdm-all/item\\_viewer.php?CISOROOT=/clipping&CISOPTR=9914&CISOBX=1&REC=1](http://content.wsulibs.wsu.edu/cdm-all/item_viewer.php?CISOROOT=/clipping&CISOPTR=9914&CISOBX=1&REC=1).

<sup>51</sup> “Silas Whitman is Called to Reward.” *Lewiston Morning Tribune*. April 3, 1935, n.d.

<sup>52</sup> Trafzer. *Death Stalks the Yakama*. 5.

originated from Haskell, Kansas.<sup>53</sup> However, other researchers believe the disease was originally a swine flu which adapted and began to affect humans. In fact, many believe that the 1918 influenza belongs to the same family of viruses which the 2009 swine influenza originated from. This family of viruses has a tendency to become pandemic and create havoc in both animal and human populations.<sup>54</sup>

Like the 1918 influenza, the 2009 swine influenza disrupted social life in the United States. This flu mimicked the symptoms of the 1918 virus. In a 2009 article, the Centers for Disease Control and Prevention (CDC) stated that there were 426 deaths due to swine influenza among Native Americans and Alaska Natives in 12 states which included Washington.<sup>55</sup> In addition, the majority of deaths occurred between the ages of 25 and 64. In the beginning, this virus acts similar to a seasonal flu.<sup>56</sup> A victim experiences high fever, runny nose, coughing, chills, headaches, and aches. Unlike the seasonal influenza, complications might occur with the swine influenza. Patients experiencing seizures, dizziness, tingling around the lips, vomiting, difficulty of breath, and confusion were warned to visit their medical provider immediately.<sup>57</sup>

Like the Public Health Department in 1918, the CDC, in recent years, along with the Indian Health Services, has begun to educate the Native American population about the disease. Various forms of media, including online videos and websites, were used to provide information on prevention and health. Wes Studi, a well-known Native American

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<sup>53</sup> Alfred Crosby. *America's Forgotten Pandemic*. (New York, NY: Cambridge University Press, 2003)18.

<sup>54</sup> Vernon Dorisson. *Pandemic: Influenza Pandemic* (Denver, CO: Outskirts Press, 2007) 2-3.

<sup>55</sup> Centers for Disease Control and Prevention. "Deaths Related to 2009 Pandemic Influenza A (H1N1) Among American Indian/Alaska Natives --- 12 States, 2009." *Morbidity and Mortality Weekly Report*. Vol. 58, no. 48. (2009)1341-1344. (Accessed March 13, 2012)  
<http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5848a1.htm>.

<sup>56</sup> Flu.gov. *H1N1 (originally referred to as Swine Flu)* n.d. (Accessed March 1, 2012)  
<http://www.flu.gov/types/h1n1/index.html>.

<sup>57</sup> U.S. Department of Health and Human Services. "Symptoms" *Flu.Gov*. (Accessed March 13, 2012)  
<http://www.flu.gov/symptoms-treatment/symptoms/index.html>.

actor, hosted a series of online videos directed at educating Aboriginal Americans. In the series, Native Americans and other minority groups were encouraged to get vaccinated due to their susceptibility to influenza. In addition, Studi discussed prevention techniques which were similar to the ones used in 1918. People were warned to cover their coughs utilizing a tissue and stay away from sick individuals. In addition, professionals recommend people wash their hands with soap and water or an alcohol base disinfectant, eat healthy, get plenty of rest, and do not stress. If the person was ill, professionals warned that they need to go home and rest. If the person's condition worsens, they needed to visit their health care provider.<sup>58</sup>

According to the CDC, the vaccine was the main line of defense against the disease. Like Native Americans, the medical staff recommended pregnant women, the infirm, the elderly, and young children to be vaccinated. Vaccinations cannot provide a 100 percent protection.<sup>59</sup> The second line of defense is anti-virals. The medical staff supplies patients with anti-virals in order to reduce the effects of the disease and prevent pneumonia. Some anti-virals can prevent the disease. Today, there are two types of anti-virals that are CDC and FDA approved, Tamiflu and Relenza. Tamiflu comes in a pill form while, Relenza is in a powder form.<sup>60</sup>

Despite these new advances in medicine, health officials and doctors still believe that society is vulnerable to influenza pandemics. During times of crisis, the CDC and drug companies will find it difficult keeping up to the mass production of vaccines and

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<sup>58</sup> Indian Health Services. *Seasonal Influenza: Educational Resources*. n.d. (Accessed March 1, 2012) [http://www.ihs.gov/flu/index.cfm?module=dsp\\_h1n1\\_resources](http://www.ihs.gov/flu/index.cfm?module=dsp_h1n1_resources).

<sup>59</sup> Centers for Disease Control and Prevention. *Preventing Seasonal Flu with Vaccination*. September 8, 2011. (Accessed March 1, 2012) <http://www.cdc.gov/flu/protect/vaccine/index.htm>.

<sup>60</sup> Centers for Disease Control and Prevention. *What You Should Know About Flu Antiviral Drugs*. October 17, 2011, (Accessed by March 13, 2012) <http://www.cdc.gov/flu/antivirals/whatyoushould.htm>.

anti-virals. Based on 1918 influenza events, chaos and pandemonium will ensue. Currently, several federal entities including the Indian Health Services are developing plans to meet such a crisis.<sup>61</sup>

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<sup>61</sup> Barry. *The Great Influenza*. 454-455.

## Conclusion

Today, society's dependence on the influenza vaccine has created a dilemma for the nation's public health. In *The Great Influenza: The Story of the Deadliest Pandemic in History*, John Barry argues that it's impossible to mass produce vaccines and distribute the serum to millions of people during a pandemic's six months duration. Not until the middle of the second wave could everyone be vaccinated. Barry bases his theory on a 2004 incident where a British plant failed to supply the United States with about 50 million doses.<sup>1</sup> On October 6, 2004, *National Public Radio* reported "Americans' supply of flu vaccine was cut nearly in half Tuesday as Britain shut down the world's second-leading supplier. The Chiron Corp. had intended to ship 48 million doses of vaccine to the United States, but regulators suspended the company's license, citing problems at its Liverpool, England, manufacturing plant. Authorities are urging healthy Americans to defer getting shots so that medication will be available for the elderly, infants and others at high risk[sic]."<sup>2</sup>

In a pandemic situation, foreign countries obviously would not allow any serum to leave their nation. As a result, half of the population of the United States would not be vaccinated. Native Americans, along with other minorities, would be affected by this shortage.<sup>3</sup> In 2009, such a scenario happened during the Swine flu pandemic. On October 26, 2009, *National Public Radio* reported "Millions of Americans already have been infected with swine flu. Forty-six states have widespread influenza, and the president has declared a national emergency. But only recently have U.S. health officials

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<sup>1</sup> John Barry. *The Great Influenza: The Story of the Deadliest Pandemic in History*. (New York, NY: Penguin Books 2006) 454-455

<sup>2</sup> Melissa Block. "U.S. Faces Vaccine Shortage." *National Public Radio*. October 6, 2004. (Accessed March 24, 2012) <http://www.npr.org/templates/story/story.php?storyId=4073505>.

<sup>3</sup> Barry. *The Great Influenza*. 454-455.

discovered why manufacturers can't deliver as much swine flue [sic] vaccine as expected. Officials at the Centers for Disease Control and Prevention say for months, the companies didn't realize how far short their vaccine "yields" were falling[sic]." <sup>4</sup>

Anti-viral drugs, the second line of defense, which either prevent or mitigate the effects, were critical in the first stages of the disease. Governments such as the United States were only recently stockpiling anti-virals for future pandemics. In case of a crisis, these medical supplies would be depleted rapidly. <sup>5</sup>

In recent years, the Indian Health Services have maintained a surveillance of influenza trends on both Swine and Seasonal Flu within the Native Americans' populations. Their main recommendation for tribal members is to become vaccinated each year. These vaccinations would protect individuals and keep the disease from spreading to family members and colleagues. Like many other health organizations, the Indian Health Services has given no indication of a contingency plan. <sup>6</sup>

Based on my research, I conclude that exact statistical data on Native Americans' mortality rates is inconclusive due to poor record retention and cultural bias. According to the census information, the Nez Perce Reservation had a 5% mortality rate in 1918. However, there was no differentiation between influenza and other diseases. According to government records, the Colville Reservation's mortality rate was 2.5%. <sup>7</sup> The Yakama

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<sup>4</sup> Richard Knox. "Swine Flu Vaccine Shortage: Why?" *National Public Radio*. October 26, 2009. (Accessed March 18, 2012) <http://www.npr.org/templates/story/story.php?storyId=114156775>.

<sup>5</sup> Barry. *The Great Influenza*. 454-455.

<sup>6</sup> Indian Health Services. *Seasonal Influenza*. n.d. (Accessed March 13, 2012) [http://www.ihs.gov/Flu/index.cfm?module=dsp\\_h1n1\\_resources](http://www.ihs.gov/Flu/index.cfm?module=dsp_h1n1_resources).

<sup>7</sup> Bureau of Indian Affairs. Annual Report of the Commissioner of Indian Affairs (Washington D.C.: Government Printing Office, 1919) 140-142; Superintendent Morgan to Commissioner Sells, November 1, 1918 to December 31, 1918, Folder: Health and Sanitation, Box 217a Northwest Regional Archives, Branch, Seattle, WA RG 75.

Reservation had a mortality rate of 1%.<sup>8</sup> Author Clifford Trafzer argues that statistical information from the Yakama Agency is inconclusive as well, due to poor record keeping and distrust between Native Americans and Whites.<sup>9</sup> At the same time, the disease was widespread, affecting the area's White population in 1918 and 1919. Spokane, the second largest city in Washington State, experienced 1045 deaths with a mortality rate of 1%.<sup>10</sup> The Lewiston, Idaho population of 6574 had 53 deaths with a mortality rate of .8%.<sup>11</sup> Nezperce, Idaho with a population of 677 had 18 deaths with a mortality rate of 2%.<sup>12</sup> Unfortunately, the records do not differentiate between Native American and White deaths.

The influenza's impact differed from one reservation to the next. The Spokane experienced a few cases of influenza and two deaths.<sup>13</sup> The Colville had five hundred thirty-three cases and a death toll of sixty-six.<sup>14</sup> However, some areas such as the Nez Perce reservations, continued to feel the impact of the disease for several more years.<sup>15</sup>

This study analyzes the impact on health of the social and cultural issues that Native Americans faced since 1885. This minority population was forcibly relocated to

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<sup>8</sup> Bureau of Indian Affairs. Annual Report of the Commissioner of Indian Affairs (Washington D.C.: Government Printing Office, 1919) 140-142. ; Don S. Carr to Cato Sells, January 31, 1919. Circular No. 1494. Folder: Spanish Influenza Box 264, Northwest Regional Archives Branch, Seattle, WA RG 75.

<sup>9</sup> Trafzer. *Death Stalks the Yakama*. 85.

<sup>10</sup> Kenneth Knoll. "When the Plague Hit Spokane." *The Pacific Northwestern* 33, no. 1 (1989) 7.; United States Department of Health and Human Services "Washington" *The Great Pandemic: The United States in 1918- 1919*. (Accessed January 12, 2012) [http://1918.pandemicflu.gov/your\\_state/washington.htm](http://1918.pandemicflu.gov/your_state/washington.htm).

<sup>11</sup> Riley Moffat. *Population of Western U.S. Cities and towns, 1850 -1990*. (Lanham, Md: Scarecrow Press 1996) 95; Daniel Miller, *Little Patch of Idaho* (Lewiston, ID: Steeley Print and Binding, 2007) 156.

<sup>12</sup> Ibid, 96; Jennifer K. Bauer. "N. Idaho town recalls 1918 pandemic flu" *Lewiston Morning Tribune*, May 16, 2009, n.d.

<sup>13</sup> Don S. Carr to Cato Sells, January 31, 1919. Circular No. 1494. Folder: Spanish Influenza. Box 264. Northwest Regional Archives, Branch, Seattle, WA RG 75.

<sup>14</sup> Superintendent Morgan to Commissioner Sells, November 1, 1918 to December 31, 1918, Folder: Health and Sanitation, Box 217a Northwest Regional Archives, Branch, Seattle, WA RG 75.

<sup>15</sup> Superintendent of the Nez Perce Indian Agency to Commissioner of Indian Affairs. October 18, 1923. Folder: Superintendent Correspondence. Box 035. Northwest Regional Archives, Branch, Seattle, WA RG 75.

plots of land reserved for them, and also forced to adapt to federal policies and white western culture. This oppression of the Native Americans impacted both their mental and physical well-being. As a result, they became susceptible to diseases such as tuberculosis, pneumonia, and influenza.<sup>16</sup> In September 2004, in their “Broken Promises” report, the U.S. Commission on Civil Rights argued that issues such as cultural and language barriers, health care funding, and access to medical care were still affecting all reservations. These problems had also been addressed in the Meriam report of 1928.<sup>17</sup>

Over the years, the majority of medical research has focused on diseases such as tuberculosis, caused by bacillus, and trachoma, an infection and scarring of the eyes, which have impacted the overall Native American population.<sup>18</sup> However, it seems that scholars have forgotten the effects of other diseases such as influenza. In comparison to tuberculosis, influenza has killed a small number of Native Americans. In 1918, on several reservations, the influenza deaths outnumber the ones due to tuberculosis.<sup>19</sup> Like the rest of the country, the influenza became a “forgotten pandemic” as Alfred Crosby described the nationwide event.

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<sup>16</sup> Trafzer “Effects of the Walla Walla Treaty Council.” 406-407.

<sup>17</sup> U.S. Commission on Civil Rights. *Broken Promises: Evaluation the Native American Healthcare System*. September 2004. (Accessed March 15, 2012) <http://www.usccr.gov/pubs/nahealth/nabroken.pdf>.

<sup>18</sup> George St. J Perrott, and Margaret D. West. “Health Services for American Indians.” *Public Health Reports* (1896 – 1970) 72, no. 7 (1957) 565-570

<sup>19</sup> Trafzer. *Death Stalks the Yakama*. 139.



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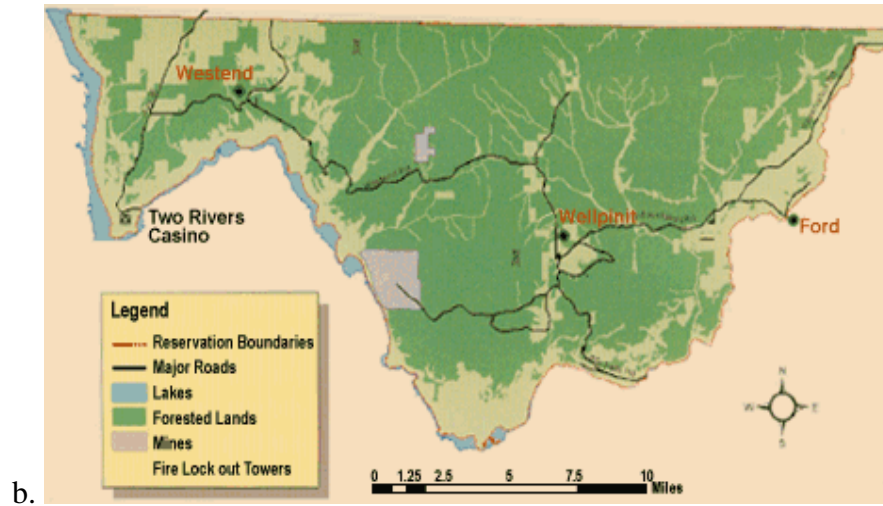
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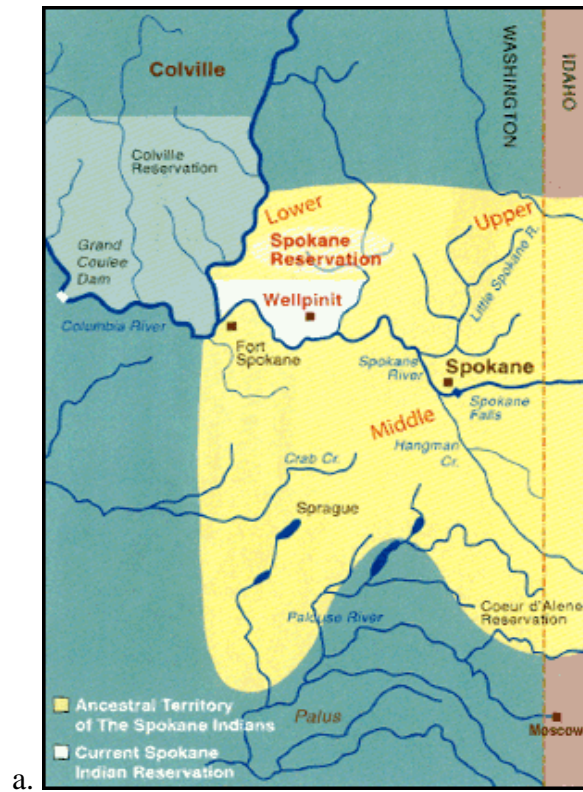


## Figures

### 1. Spokane Reservation

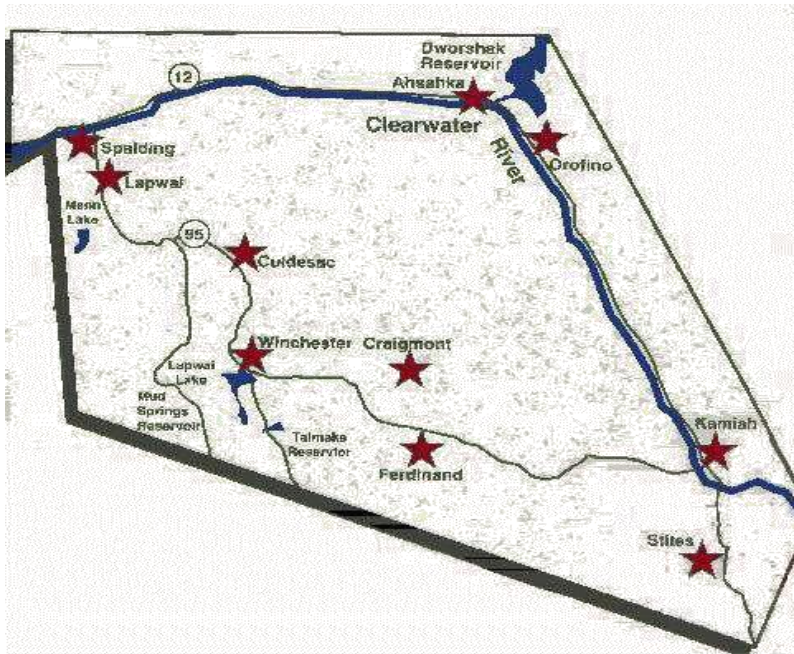


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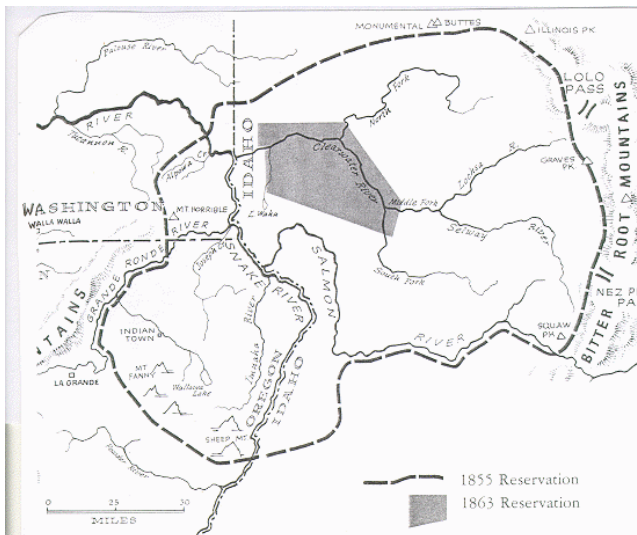


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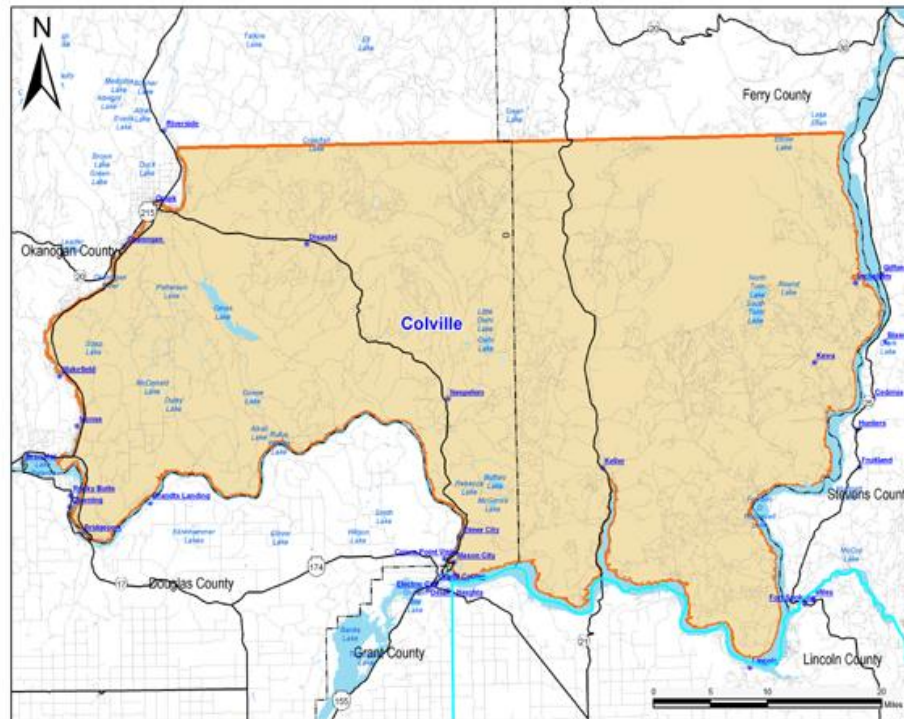


(Current Boundaries with in Promised)

Rootsweb. *Nez Perce Reservation Map*. November 26, 2002. (Accessed March 20, 2012) <http://www.rootsweb.ancestry.com/~idreserv/npmap.html>.



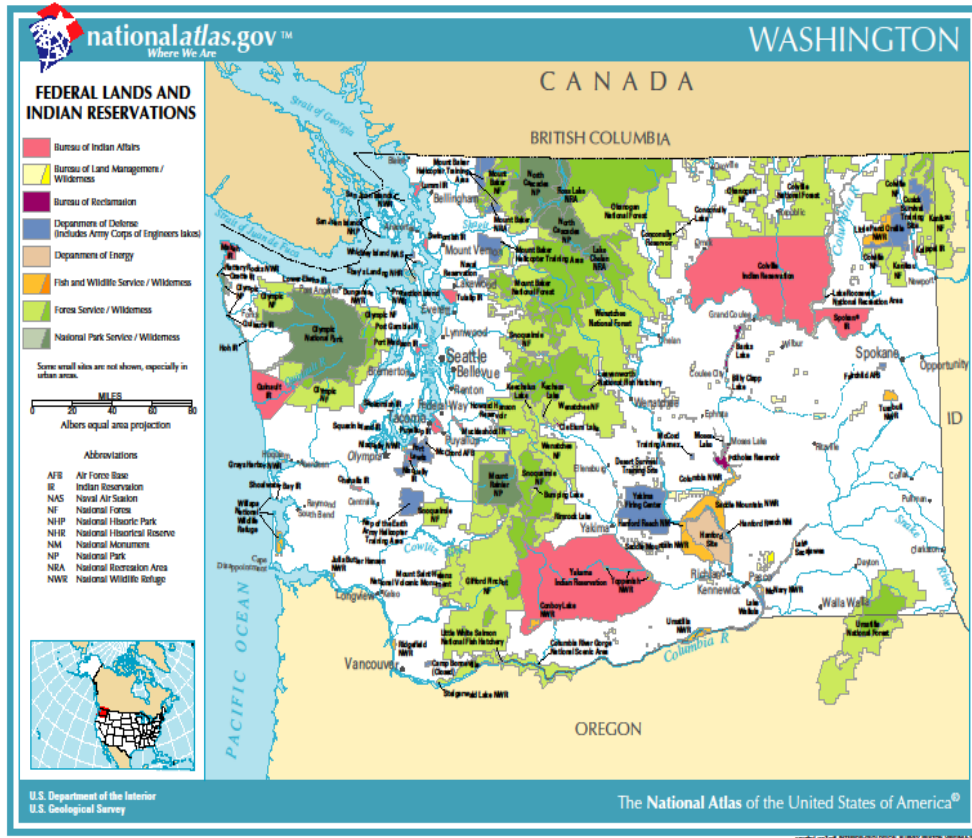
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<http://yosemite.epa.gov/r10/airpage.nsf/bd6b0d4b002fc05b88256ab000715627/3ec677a266e611cb88256fef006230be!OpenDocument>.

5. Map of Washington

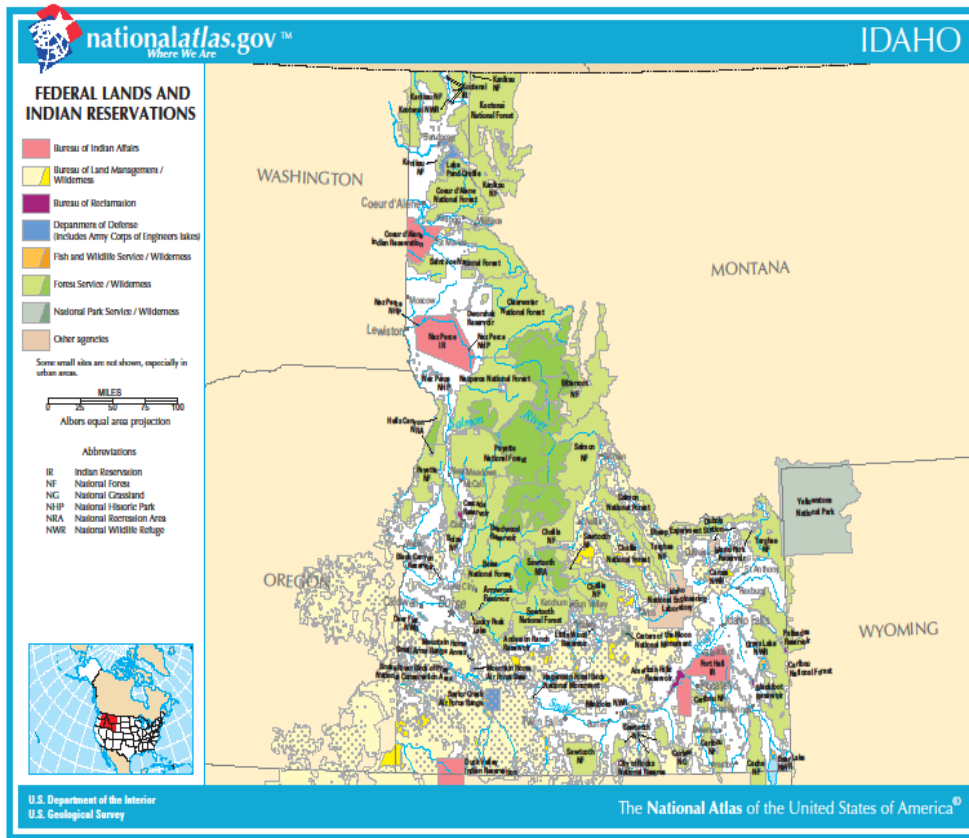


State.

National Atlas of the United States of America. *Map of Washington State*. n.d. (Accessed March 20 2012) <http://nationalatlas.gov/printable/images/pdf/fedlands/wa.pdf>.

\*Two largest red formations indicate the Colville and Yakima Reservations. The Spokane Reservation lies at the southeast corner of the Colville, in the upper right corner.

6. Map of Idaho State.



National Atlas of the United States of America. *Map of Idaho State*. n.d. (Accessed March 20 2012) <http://www.nationalatlas.gov/printable/images/pdf/fedlands/ID.pdf>.

\*Red's indicates Native American Reservations in Idaho. The largest one, near the Washington and Oregon State line, is the Nez Perce Reservation.

7. Example (Certificate of Cecilia Nye)

**BUREAU OF VITAL STATISTICS  
REGISTER OF DEATH**

Registered No. 723

PLACE OF DEATH  
County of Yakima  
City or Town of \_\_\_\_\_  
Registration Dist. No. R# 9 (No. Indian Reservation) St; \_\_\_\_\_ Ward \_\_\_\_\_

[If death occurs away from USUAL RESIDENCE give facts called for under "Special Information."]  
FULL NAME Cecilia Nye [If death occurred in a Hospital or Institution give its NAME instead of street and number.]

Personal and Statistical Particulars			Medical Certificate of Death		
3 Sex <u>F.</u>	4 Color or Race <u>Red</u>	5 Single, Married, Widowed, or Divorced (Write the word)	16 Date of Death <u>Oct</u> <u>23</u> <u>1918</u> (Month) (Day) (Year)	17 I HEREBY CERTIFY, That I attended deceased from _____, 191__ to _____, 191__ that I last saw h. alive on _____, 191__ and that death occurred, on the date above, at _____ m. The CAUSE OF DEATH* was as follows: <u>Spanish Influenza and Tuberculosis</u>	
6 Date of Birth _____, _____, <u>1902</u> (Month) (Day) (Year)			7 Age <u>16</u> yrs. ____ mos. ____ ds. If LESS than 1 day, ____ hrs. or ____ min.?		
8 Occupation (a) Trade, profession or particular kind of work (b) General nature of industry, business or establishment in which employed (or employer)			Contributory (Secondary) _____ (Duration) ____ yrs. ____ mos. ____ ds.		
9 Birthplace (State or country) <u>Wash.</u>			(Signed) _____, M. D. _____, 191__ (Address)		
10 Name of Father <u>Thomas Nye</u>			*State the DISEASE CAUSING DEATH, or, in deaths from VIOLENT CAUSES, state (1) MEANS OF INJURY; and (2) whether ACCIDENTAL, SUICIDAL, or HOMICIDAL.		
11 Birthplace of Father (State or country) <u>Wash.</u>			18 Length of Residence (For Hospitals, Institutions, Transients, or Recent Residents) At Place of death ____ yrs. ____ mos. ____ ds. In the State ____ yrs. ____ mos. ____ ds.		
12 Maiden name of Mother <u>Ann Jasmin Napahleas</u>			Where was disease contracted, if not at place of death? Former or usual residence _____ Date of Burial _____		
13 Birthplace of Mother (State or country) _____			19 Place of Burial or Removal _____ Address _____		
14 The above is true to the best of my knowledge (Informant) _____					

Cecilia Nye's Death Certificate, October 25, 1918. Reproduced at the National Archives and Record Administration – Pacific Alaska Region (Seattle)

8. Example (Death Certificate of Lottie La Lemash)

V. S. No. 10. **Washington State Board of Health**  
**BUREAU OF VITAL STATISTICS**  
**REGISTER OF DEATH**

PLACE OF DEATH  
 County of Yakima  
 City or Town of W. Smead  
 Registration Dist. No. #9 (No. Indian Reservation) St; \_\_\_\_\_ Ward) Registered No. 107

[If death occurs away from USUAL RESIDENCE give facts called for under "Special Information."] FULL NAME Lottie La Lemash [If death occurred in a Hospital or Institution give its NAME instead of street and number.]

Personal and Statistical Particulars			Medical Certificate of Death	
3 Sex <u>F.</u>	4 Color or Race <u>Red.</u>	5 Single, Married, Widowed, or Divorced <u>Single</u> (Write the word)	16 Date of Death <u>Dec</u> (Month) _____ (Day) _____ (Year) <u>1918</u>	
6 Date of Birth <u>July</u> (Month) _____ (Day) _____ (Year) <u>1906</u>			17 I HEREBY CERTIFY, That I attended deceased from _____, 191__ to _____, 191__ that I last saw h_____ alive on _____, 191__ and that death occurred, on the date above, at _____ m. The CAUSE OF DEATH* was as follows: _____ _____ _____ (Duration) _____ yrs. _____ mos. _____ ds.	
7 Age <u>11</u> yrs. <u>5</u> mos. _____ ds. If LESS than 1 day, _____ hrs. or _____ min.?			Contributory (Secondary) (Duration) _____ yrs. _____ mos. _____ ds. (Signed) _____, M. D. _____, 191__ (Address) _____	
8 Occupation (a) Trade, profession or particular kind of work <u>School Girl</u> (b) General nature of industry, business or establishment in which employed (or employer) _____			*State the DISEASE CAUSING DEATH, or, in deaths from VIOLENT CAUSES, state (1) MEANS OF INJURY; and (2) whether ACCIDENTAL, SUICIDAL, or HOMICIDAL.	
9 Birthplace (State or country) <u>Tappanish Wn.</u>			18 Length of Residence (For Hospitals, Institutions, Transients, or Recent Residents) At Place of death _____ yrs. _____ mos. _____ ds. In the State _____ yrs. _____ mos. _____ ds. Where was disease contracted, if not at place of death? Former or usual residence _____	
10 Name of Father <u>La Lemash</u>			19 Place of Burial or Removal _____ Date of Burial _____	
11 Birthplace of Father (State or country) <u>Tappanish Wn.</u>				
12 Maiden name of Mother <u>Halleival Isaac</u>				
13 Birthplace of Mother (State or country) <u>Tappanish Wn.</u>				
14 The above is true to the best of my knowledge (Informant) <u>Esther Sprague</u> (Address) <u>Tappanish Wn.</u>				

Lottie La Lemash's Death Certificate, December 1918. Reproduced at the National Archives and Record Administration – Pacific Alaska Region (Seattle)



9. Example (Death Certificate of Anna Doolittle Paul)

Reproduced at the National Archives and Records Administration—Pacific Alaska Region (Seattle)

REPORT OF DEATH

(Indian name) \_\_\_\_\_ (English name) Anna Doolittle Paul

Sex Female Tribe Kutchick Degree of Indian blood 3/4 blood

Allotment No. 1359 Census No. \_\_\_\_\_ for fiscal year 191

If married woman  
name of husband \_\_\_\_\_ (Indian) Seagun Paul (English)

If a minor, names of  
parents \_\_\_\_\_ Allot. No. \_\_\_\_\_  
(Father) \_\_\_\_\_  
\_\_\_\_\_ Allot. No. \_\_\_\_\_  
(Mother) \_\_\_\_\_

Date of Death Jan 22 1919  
(Month) (Day) (Year)

Place of death Inchelemin, Alaska

Cause of death Pneumonia following influenza

Age at time of death 26 years of age

Shas. Hansen  
(Signature of person reporting)

Inchelemin, Alaska  
(Address)

Jan 24, 1919  
(Date)

51 Record of Deaths + Report of Births

Anna Doolittle Paul's Death Certificate. January 22, 1919. Reproduced at the National Archives and Record Administration – Pacific Alaska Region (Seattle)

10. Example (Death Certificate of Lena Brooks)

Reproduced at the National Archives and Records Administration—Pacific Alaska Region (Seattle)

REPORT OF DEATH

(Indian name) \_\_\_\_\_ (English name) Lena Brooks

Sex Female Tribe Col Degree of Indian blood Full

Allotment No. 662 Census No. 279 for fiscal year 1917

If married woman  
name of husband \_\_\_\_\_  
(Indian) \_\_\_\_\_ (English) \_\_\_\_\_

If a minor, names of  
parents Minnie Brooks Allot. No. 1 1/2 allot.  
(Father) \_\_\_\_\_  
(Mother) \_\_\_\_\_ Allot. No. \_\_\_\_\_

Date of Death Nov 22 1918  
(Month) (Day) (Year)

Place of death Omah

Cause of death Influenza

Age at time of death 13

M. B. [Signature]  
(Signature of person reporting)

Omah  
(Address)

Nov 24 - 18  
(Date)

Record of Deaths + Report of Births

Lena Brook's Death Certificate. November 22, 1918. Reproduced at the National Archives and Record Administration – Pacific Alaska Region (Seattle)

I, Susan Margaret Mayer, hereby submit this thesis/report to Emporia State University as partial fulfillment of the requirements for an advanced degree. I agree that the Library of the University may make it available to use in accordance with its regulations governing materials of this type. I further agree that quoting, photocopying, digitizing or other reproduction of this document is allowed for private study, scholarship (including teaching) and research purposes of a nonprofit nature. No copying which involves potential financial gain will be allowed without written permission of the author.

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Signature of Author

April 23, 2012

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Date

Four Pacific Northwest Reservations and the  
Influenza Pandemic

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Title of Thesis

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Signature of Graduate School Staff

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Date Received