

THE STORY OF A NATIONAL CRIME

BY

P. H. Bryce, M.A., M.D.

BEING

AN APPEAL FOR JUSTICE TO THE INDIANS OF CANADA

THE WARDS OF THE NATION:

OUR ALLIES IN THE REVOLUTIONARY WAR:

OUR BROTHERS-IN-ARMS IN THE GREAT WAR.

THE STORY OF A NATIONAL CRIME

Being A

Record of the Health Conditions of the Indians of Canada from 1904 to 1921

By

Dr. P. H. Bryce, M.A., M.D.

Chief Medical Officer of the Indian Department.

I. By Order in Council dated Jan. 22nd, 1904, the writer was appointed Medical Inspector to the Department of the Interior and of Indian Affairs, and was entrusted with the health interests of the Indians of Canada. The Order in Council recites:—

“The undersigned has the honour to report that there is urgent necessity for the appointment of a medical inspector to represent the Department of the Interior and Department of Indian Affairs. The undersigned believes that the qualifications for the position above mentioned are possessed in an eminent degree by Mr. Peter Henderson Bryce, M.D., at present and for a number of years past Secretary for the Provincial Board of Health of Ontario, and who has had large experience in connection with the public health of the province.”

(Signed) Clifford Sifton,

Minister of the Interior and Superintendent General of Indian Affairs.

For the first five months after the writer's appointment he was much engaged in organizing the medical inspection of immigrants at the sea ports; but he early began the systematic collection of health statistics of the several hundred Indian Bands scattered over Canada. For each year up to 1914 he wrote an annual report on the health of the Indians, published in the Departmental report, and on instructions from the minister made in 1907 a special inspection of thirty-five Indian schools in the three prairie provinces. This report was published separately; but the recommendations contained in the report were never published and the public knows nothing of them. It contained a brief history of the origin of the Indian Schools, of the sanitary condition of the schools and statistics of the health of the pupils, during the 15 years of their existence. Regarding the health of the pupils, the report states that 24 per cent. of all the pupils which had been in the schools were known to be dead, while of one school on the File Hills reserve, which gave a complete return to date, 75 per cent. were dead at the end of the 16 years since the school opened.

[Recommendations of school report 1907.]

Briefly the recommendation urged, (1) Greater school facilities, since only 30 per cent. of the children of school age were in attendance; (2) That boarding schools with farms attached be established near the home reserves of the pupils; (3) That the government undertake the complete maintenance and control of the schools, since it had promised by treaty to insure such; and further it was recommended that as the Indians grow in wealth and intelligence they should pay at least part of the cost from their own funds; (4) That the school studies be those of the curricula of the several Provinces in which the schools are situated, since it was assumed that as the bands would soon become enfranchised and become citizens of the Province they would enter into the common life and duties of a Canadian community; (5) That in view of the historical and sentimental relations between the Indian schools and the Christian churches the report recommended that the Department provide for the management of the schools, through a Board of Trustees, one appointed from each church and approved by the minister of the Department. Such a board would have its secretary in the Department but would hold regular meetings,

establish qualifications for teachers, and oversee the appointments as well as the control of the schools; (6) That Continuation schools be arranged for on the school farms and that instruction methods similar to those on the File Hills colony be developed; (7) That the health interests of the pupils be guarded by a proper medical inspection and that the local physicians be encouraged through the provision at each school of fresh air methods in the care and treatment of cases of tuberculosis.

II. The annual medical reports from year to year made reference to the unsatisfactory health of the pupils, while different local medical officers urged greater action in view of the results of their experience from year to year. As the result of one such report the Minister instructed the writer in 1909 to investigate the health of the children in the schools of the Calgary district in a letter containing the following:—

“As it is necessary that these residential schools should be filled with a healthy class of pupils in order that the expenditure on Indian education may not be rendered entirely nugatory, it seems desirable that you should go over the same ground as Dr. Lafferty and check his inspection.”

These instructions were encouraging and the writer gladly undertook the work of examining with Dr. J. D. Lafferty the 243 children of 8 schools in Alberta, with the following results:—

(a) Tuberculosis was present equally in children at every age; (b) In no instance was a child awaiting admission to school found free from tuberculosis; hence it was plain that infection was got in the home primarily; (c) The disease showed an excessive mortality in the pupils between five and ten years of age; (d) The 10,000 children of school age demanded the same attention as the thousand children coming up each year and entering the schools annually.

[Recommendations based upon examination of 243 school children.]

Recommendations, made in this report, on much the same lines as those made in the report of 1907, followed the examination of the 243 children; but owing to the active opposition of Mr. D. C. Scott, and his advice to the then Deputy Minister, no action was taken by the Department to give effect to the recommendations made. This too was in spite of the opinion of Prof. George Adami, Pathologist of McGill University, in reply to a letter of the Deputy Minister asking his opinion regarding the management and conduct of the Indian schools. Prof. Adami had with the

writer examined the children in one of the largest schools and was fully informed as to the actual situation. He stated that it was only after the earnest solicitation of Mr. D. C. Scott that the whole matter of Dr. Bryce's report was prevented from becoming a matter of critical discussion at the annual meeting of the National Tuberculosis Association in 1910, of which he was then president, and this was only due to Mr. Scott's distinct promise that the Department would take adequate actions along the lines of the report. Prof. Adami stated in his letter to the Deputy Minister:—

“It was a revelation to me to find tuberculosis prevailing to such an extent amongst these children, and as many of them were only suffering from the early incipient form of the disease, though practically everyone was affected, when under care it may be arrested. I was greatly impressed with the responsibility of the government in dealing with these children. . . . I can assure you my only motive is a great sympathy for these children, who are the wards of the government and cannot protect themselves from the ravages of this disease.”

III. In reviewing his correspondence the writer finds a personal letter, written by him to the Minister dated March 16th, 1911, following an official letter regarding the inaction of the Department with regard to the recommendation of the report. This letter refers to the most positive promises of Mr. D. C. Scott that the Department would at once take steps to put the suggestions contained in the report into effect. The letter further says:—

“It is now over 9 months since these occurrences and I have not received a single communication with reference to carrying out the suggestions of our report. Am I wrong in assuming that the vanity of Mr. D. C. Scott, growing out of his success at manipulating the mental activities of Mr. Pedley, has led him to the fatal deception of supposing that his cleverness will be equal to that of Prospero in calming any storm that may blow up from a Tuberculosis Association or any where else, since he knows that should he fail he has through memoranda on file placed the responsibility on Mr. Pedley and yourself. In this particular matter, he is counting upon the ignorance and indifference of the public to the fate of the Indians; but with the awakening of the health conscience of the people, we are now seeing on every hand, I feel certain that serious trouble will come out of departmental inertia, and I am not personally disposed to have any blame fall upon me.”

It will then be understood with what pleasure the writer hailed the appointment of Dr. W. A. Roche as Superintendent General of Indian Affairs after the year's term of the Hon. R. Rogers, whose chief activity was the investigation of the Deputy Minister, which led up to his retirement. Now at last he said, "A medical minister exists who would understand the situation as relates to the health of the Indians." So an early opportunity was taken to set forth in a memorandum to Dr. Roche, dated Dec. 9th, 1912, data and statistics relating to the several hundred scattered bands on whose health the total expenditure was but little more than \$2 per capita, while the death rate in many of the bands was as high as forty per thousand. The reply acknowledging receipt of this memorandum contained the following:—

"There is certainly something in your suggestion that should meet with every consideration, and some time when I can find an opportunity and it is convenient to you, I shall be pleased to discuss this matter with you."

[Dr. Roche is urged to act.]

As Dr. Roche became ill and was absent for some months nothing further was done; but on his return the writer in a personal interview urged that this serious medical Indian problem be taken up in earnest. It was stated that medical science now knows just what to do and what was necessary was to put our knowledge into practice. Dr. Roche stated that on his return from the West he would certainly take the matter up. Since that moment however, to the present, the matter has awaited the promised action.

The writer had done no regular inspection work since Mr. D. C. Scott was made Deputy minister in 1913, but had in each year up to 1914 prepared his medical report, printed in the annual report of the Department. About this time the following letter was received:—

Ottawa, June 17, 1914.

P. H. Bryce, M.D.

Medical Inspector,

Immigration Branch

Dear Sir,

In reply to your letter of the first instant, asking that the files of the Department, containing our medical officers' reports be placed at your disposal, so that you may peruse them to enable you to furnish a report for publication, I desire to point out, that by the organization of this Department, under the Civil Service Act of 1908 you were not included therein and since that time your whole salary has been a charge against the Department of the Interior. It is true that since then we have availed ourselves of your services on a few occasions; but during the past year, so far as I am aware, you have not been called upon to do any duty for the Department. I may say also that Dr. Grain of Winnipeg, has lately been appointed to oversee the Western schools and reserves and his time is fully occupied in the work. Under these circumstances, I do not think that you should be asked to furnish a report on the medical work in connection with Indians during the fiscal year. I must thank you cordially for the offer to again prepare a report for publication.

Yours sincerely,

Duncan C. Scott,

D. S. G. I. A.

[Mr. Scott's malign influence.]

The transparent hypocrisy contained in this remarkable communication sent, not by the Minister Dr W. A. Roche, but by his deputy, will be seen in the fact that from 1908, five annual reports had been prepared by the writer, while the special report on the eight schools of the Calgary district with the recommendations already referred to had been made on the instructions of the Department in 1909. The other reason given, to the effect that a certain physician, since retired for good cause, quite inexperienced in dealing with Indian disease problems, had been appointed as Medical Inspector for the Western Provinces, showed how little the Minister cared for the solution of the tuberculosis problem. As a matter of fact the Order in Council appointing the writer had neither been changed nor rescinded, while the transfer to the Interior Department of the payment of the total salary was made in 1908 in order that his regular increase of pay under the new classification of the Civil Service Act of that year might be made.

[Dr. Roche's culpable apathy.]

[Value of man power of Indians.]

IV. As the war broke out in 1914 and immigration was largely suspended, an unexpected opportunity occurred through the greater time at his disposal for the writer's special knowledge and experience to be utilized in improving the health of the Indians; but in no single instance, thereafter, were the services of the writer utilised by this medical Minister, who in 1917 was transferred to preside over the Civil Service Commission, and who must be held responsible for the neglect of what proved to be a very serious situation. In 1917, the writer prepared, at the request of the Conservative Commission, a pamphlet on "The Conservation of the Man Power of Canada," which dealt with the broad problems of health which so vitally affect the man power of a nation. The large demand for this pamphlet led the preparation of a similar study on "The Conservation of the Man Power of the Indian Population in Canada," which had already supplied over 2000 volunteer soldiers for the Empire. For obvious reasons this memorandum was not published, but was placed in the hands of a minister of the Crown in 1918, in order that all the facts might be made known to the Government. This memorandum began by pointing out that in 1916, 4,862,303 acres were included in the Indian reserves and that 73,716 acres were then under cultivation; that while the total per capital income for farm crops in that year in all Canada was \$110, that from the Indian reserves was \$69, while it was only \$10 for Nova Scotia. It is thus obvious that from the lowest standard of wealth producers the Indian population of Canada was already a matter of much importance to the State. From the statistics given in the "Man Power" pamphlet it was made plain that instead of the normal increase in the Indian population being 1.5 per cent. per annum as given for the white population, there had been between 1904 and 1917 an actual decrease in the Indian population in the age period over twenty years of 1,639 persons whereas a normal increase would have added 20,000 population in the 13 years. The comparisons showed that the loss was almost wholly due to a high death rate since, though incomplete, the Indian birth rate was 27 per thousand or higher than the average for the whole white population.

The memorandum states, "As the Indian people are an unusually strong native race, their children at birth are large and sturdy, and under good sanitary conditions have a low mortality.

Thus of the 134 children born in the File Hills Farm Colony in 17 years only 34 died, while of 15 births in 1916 only 1 died, giving the unusually low rate of 77 per thousand within the year.”

[Entire absence of causes of deaths.]

As it was further desirable to obtain the latest returns of deaths by age periods and causes the writer communicated with the Secretary of the Indian Department asking for such returns. In reply he received the following letter.

Ottawa, May 7, 1918.

Dear Dr. Bryce,

I have your letter of the third instant asking for certain vital statistics. I am unable to give you the figures you ask as we are not receiving any vital statistics now, and last year we obtained only the total number of births and deaths from each Agency. These were not printed and are not therefore available for distribution. The causes of deaths have never been noted in our reports and we have no information.

Your obedient servant,

(Signed) J. D. McLean,

Asst. Deputy and Secretary.

Thus after more than a hundred years of an organized Department of Indian Affairs in Canada, though the writer had at once begun in 1904 on his appointment the regular collection of statistics of diseases and deaths from the several Indian bands, he was officially informed that in a Department with 287 paid medical officers, due to the direct reactionary influence of the former Accountant and present Deputy Minister no means exists, such as is looked upon as elementary in any Health Department today, by which the public or the Indians themselves can learn anything definite as to the actual vital conditions amongst these wards of the nation.

[The famous File Hills Farm colony.]

A study of the 1916–17 statistics shows that in the wage earning period of life, from 21 to 65 years, the Indians of Alberta had 161 less population, of British Columbia 901 less, of Ontario 991 less and of Nova Scotia 399 less. In order however to show how an Indian population may increase, the writer obtained from Mr. W. M. Graham, at that time Superintendent of the File Hills colony from 1901 to 1917, the complete record for this period. In all there were 53 colonists from the neighbouring Indian schools, starting with five in 1901, who had taken up homesteads in the colony. Most of them married although 15 either left or had died previous to marriage. In June 1917 there were resident 38 men, 26 women and 106 children, or 170 colonists in all. Thus we have the picture of a young Indian population of 49 males who remained in the colony, of whom 10 died of tuberculosis after an average sickness there of 2.7 years and of 29 females of whom 3 died and to whom had been born in all 34 children. In 1916 the colony had 3,991 acres under cultivation or over a hundred acres per farmer. This was one nineteenth of the total area cultivated by 105,000 persons in all the Indian bands in Canada, while 87,498 bushels of grain were grown, and 33,052 head of live stock were kept. That this variation from the normal is viewed as an anomaly may be judged from the following extract from the Deputy Minister's Annual Report for 1917; "The Indian population does not vary much from year to year." How misleading this statement is may be judged from the fact that between 1906 and 1917 in the age period over 20 years in every Province but two the Indians had decreased in population by a total of 2,632 deaths.

[Extraordinary mortality from tuberculosis.]

Naturally it is asked; Why this decrease should have taken place? In 1906 the report of the Chief Medical Officer shows that statistics collected from 99 local medical officers having the care of a population of 70,000 gave a total of 3,169 cases of tuberculosis or 1 case for every seven in a total of 23,109 diseases reported, and the death rate in several large bands were 81.8, 82.6, and in a third 86.4 per thousand; while the ordinary death rate for 115,000 in the city of Hamilton was 10.6 in 1921. What these figures disclose has been made more plain year by year, namely that tuberculosis, contracted in infancy, creates diseases of the brain, joints, bones, and to a less degree of the lungs and also that if not fatal till adolescence it then usually progresses rapidly to a fatal termination in consumption of the lungs.

[The amazing reduction of tuberculosis in Hamilton.]

The memorandum prepared by the writer in 1918 further showed that the city of Hamilton with a population greater than the total Indian population had reduced the death rate from tuberculosis in the same period, from 1904 to 1917, by nearly 75 per cent. having in 1916 actually only 68 deaths. The memorandum further states, "If a similar method had been introduced amongst the bands on the health-giving uplands of Alberta, much might have been done to prevent such a splendid race of warriors as the Blackfeet from decreasing from 842 in 1904 to 726 in 1916, or, allowing for natural increase, an actual loss of 40 per cent. since they should have numbered at least 1,011."

V. Such then is the situation made known to the Hon. N. W. Rowell, who applied to the writer in 1918 to supply him with such facts and arguments as would support the Bill he proposed to introduce into Parliament for the creation of a Federal Department of Health.

[Occult influences again rob the Indians of a chance.]

It was with pleasure that the memorandum dealing with Indian health matters was given him along with a proposed Bill for a Department of Health, which contained amongst its provisions one for including the Indian Medical Service along with the other Medical Federal services in the new Department. In the special medical committee called by Mr. Rowell to discuss the Bill took place with this clause regarding the Indian Medical Service omitted. It has been noted that from 1913 up to the time when Dr. W. A. Roche was eliminated from the government in 1917 to make room for a more hardy and subtle representative of Unionism the activities of the Chief Medical Inspector of the Indian Department, had in practice ceased; yet now he was to see as the outcome of all this health legislation for which he had been struggling for years, the failure of one of his special health dreams, which he has hoped to see realized.

[One who failed them in their agony.]

If the writer had been much disturbed by the incapacity or inertia of a medical Minister in the matter of the Indian health situation, he now saw that it was hopeless to expect any improvement in it when the new Minister of Health, who had posed as the Bayard of Social Uplift, the Protagonist of Prohibition, the Champion of Oppressed Labour, the Sir Galahad of Women's

rights, and the *preux Chevalier* of Canadian Nationalism, could with all the accumulated facts and statistics before him condemn to further indefinite suffering and neglect these Wards of the Canadian people, whom one Government after another had made treaties with and whom deputies and officials had sworn to assist and protect.

A side light however, may serve to illuminate the beclouded situation. With the formation of the Unionist Government the usual shuffle of portfolios was made and the then dominating Solicitor General, grown callous and hardened over a franchise Bill, which disfranchised many thousands of his fellow native-born citizens, had now become Minister of the Interior. That the desire for power and for the control appointments should override any higher consideration such as saving the lives of the Indians must be inferred from the following statement of the Hon. A. Meighen, Minister of the Interior and now Prime Minister. On June 8th, 1920, the estimates of the Indian Department were under consideration in Parliament. Page 3275 of Hansard has the following:—

Mr. D. D. McKenzie, “I understand that frightful ravages are being made amongst them (Indians) by tuberculosis and the conditions of life are certainly not such as to preserve them from the ravages of that dread disease. I should be pleased to know at the earliest possible moment if that branch of the Department was going to be transferred to the Department of Health.

Mr. Meighen, “The Health Department has no power to take over the matter of the health of the Indians. That is not included in the Act establishing the department. It was purposely left out of the Act. I did not then think and do not think yet that it would be practicable for the Health Department to do that work, because they would require to duplicate the organization away in the remote regions, where Indian reserves are, and there would be established a sort of divided control and authority over the Indians.”

Mr. Beland, “Is tuberculosis increasing or decreasing amongst the Indians?”

Mr. Meighen, “I am afraid I cannot give a very encouraging answer to the question. We are not convinced that it is increasing, but it is not decreasing.”

[Red tape condemns the Indians because of a pitiable inertia.]

In this reply of the Minister we see fully illustrated the dominating influence, stimulated by the reactionary Deputy Minister, which prevents even the simplest effective efforts to deal with the health problem of the Indians along modern scientific lines. To say that confusion would arise is the equivalent to saying that co-operation between persons toward a desired social end is impracticable; whereas co-operation between Provincial and Federal Health Departments is the basis upon which real progress is being made, while further a world peace is being made possible in a league of once discordant nations. The Premier has frankly said he can give no encouraging answer to Dr. Beland's question, while at the same moment he condemns the Indians to their fate by a pitiable confession of utter official helplessness and lack of initiative, based upon a cynical "*non possumus.*"

Thus we find a sum of only \$10,000 has been annually placed in the estimates to control tuberculosis amongst 105,000 Indians scattered over Canada in over 300 bands, while the City of Ottawa, with about the same population and having three general hospitals spent thereon \$312,860.54 in 1919 of which \$33,364.70 is devoted to tuberculosis patients alone. The many difficulties of our problem amongst the Indians have been frequently pointed out, but the means to cope with these have also been made plain. It can only be said that any cruder or weaker arguments by a Prime Minister holding the position of responsibility to these treaty wards of Canada could hardly be conceived, and such recall the satirical jibe of Voltaire, regarding the Treaty of Shackmaxon between Wm. Penn and the Indians, which he describes as "the only known treaty between savages and Christians that was never sworn to and never broken."

The degree and extent of this criminal disregard for the treaty pledges to guard the welfare of the Indian wards of the nation may be gauged from the facts once more brought out at the meeting of the National Tuberculosis Association at its annual meeting held in Ottawa on March 17th, 1922. The superintendent of the Qu'Appelle Sanatorium, Sask., gave there the results of a special study of 1575 children of school age in which advantage was taken of the most modern scientific methods. Of these 175 were Indian children, and it is very remarkable that the fact given that some 23 per cent. of these showed evidence of tuberculous infection coincides completely with the work done by Dr. Lafferty and the writer in the Alberta Indians schools in 1909.

It is indeed pitiable that during the thirteen years since then this trail of disease and death has gone on almost unchecked by any serious efforts on the part of the Department of Indian Affairs, placed by the B. N. A. Act especially in charge of our Indian population, and that a Provincial Tuberculosis Commission now considers it to be its duty to publish the facts regarding these children living within its own Province.

EPILOGUE.

This story should have been written years ago and then given to the public; but in my oath of office as a Civil Servant swore that “without authority on that behalf, I shall not disclose or make known any matter or thing which comes to my knowledge by reason of my employment as Chief Medical Inspector of Indian Affairs.” Today I am free to speak, having been retired from the Civil Service and so am in a position to write the sequel to the story. It has already been stated that in 1918 and 1919 I had supplied to my then Minister of Immigration, the Hon. J. A. Calder and to the then President of the Council, the Hon. N. W. Rowell various memoranda regarding the establishment of a Federal Department of Health, amongst these being a draft of the Bill which later became the Act establishing the Department of Health. To my disappointment the position of Deputy Minister of Health to which I had a right to aspire after twenty years as Chief Medical Officer of Ontario, and fifteen years as Chief Medical Officer of Immigration and Indian Affairs was given to another, wholly outside the Federal Civil Service and in violation of the principle of promotion, which was supposed to prevail when the patronage system was to be done away with. The excuse was on the ground of my advancing years, although at that moment the position of Auditor General was being filled by the promotion of one who had reached sixty-five years, while a Historian to the Militia Department was appointed at a salary of \$7,000 per year, who likewise had reached just then this age.

Naturally I felt that it would be impossible to carry on and retain my self respect as a subordinate, while performing the duties, which I had been engaged in for fifteen years as Chief Medical Officer and so asked that I be given other congenial work. That my claims to the position were deemed reasonable may be judged from the following letter addressed to my brother the Rev. Professor Bryce, D.D., of Winnipeg. Writing from Victoria, B.C., on March 9th,

1920, to myself he said, quoting from a letter received from the Hon. Mr. Calder in reply to one of his own:—

“I quite appreciate the views of your brother in reference to his situation here, and personally would be only too glad to do anything I can to help out. When the Public Health Department was created, your brother certainly had claims to the appointment as Deputy Minister. Owing to his advanced age however, Council finally concluded that a younger man should receive the appointment. The government has on several occasions considered the question of placing your brother in some other branch of the Service, and I have no doubt that this will be arranged in some way or other shortly. He is now an official of the Public Health Department. He could of course remain there but this apparently is not agreeable to him. As a consequence some other arrangement, if possible must be made.

Signed, J. A. Calder.

My indignation at subsequent treatment may be imagined when the same Mr. Calder introduced the Act in 1920, commonly known as the Calder Act, providing for the “Retirement of Certain Members of the Civil Service.” This Act states that anyone retired thereunder shall receive 1/60 of his salary for each year of service. So it came about that on the 17th Sept. 1920, I received notice that I was recommended for retirement under this Act. The clause of the Act quoted for my information states:—

“Section 2 (3). When it is decided to retire anyone under the provisions of this Act, notice in writing giving the reasons for such retirement shall be sent to such person, and he shall have the right to appeal to the Civil Service Commission, and the Commission, after giving such person an opportunity to be heard, shall make full report to the Governor in Council and the decision of the Council thereon shall be final.”

I appealed and in my appeal stated that no reason was assigned as provided in the Act, and further that I was still Chief Medical Officer in the Department of Indian Affairs as set out in the Order in Council of 1904.

As bearing on this point made in my appeal I find the following in Hansard of June 8th, 1921.

The matter being dealt with is the amendment to the Calder Act:

Mr. Fielding: But cases have been brought to my attention of men in advanced years—some may think them old, I do not—being notified of their retirement, although, they are blessed with good health and strength, both mental and physical, and are well able to discharge their duties. How is such a man dealt with?

Mr. Calder: No man will be notified unless a proper official has advised that his condition of life is such that in the public interest he should be retired.....

Mr. Calder: That in the main has been the practice in the past and that is what the law contemplated last year. The question of age alone was not taken into consideration.

But it was hardly to be supposed that Dr. W. A. Roche, now Chairman of the Civil Service Commission, who during the years 1913–17 referred to had failed to utilise my services when he was Superintendent of Indian Affairs would now consider my services as necessary in that Department. So my protest was of no avail; my elimination from the Service had been decreed and I received the following Order of Council:

Ottawa, 14th Feb., 1921.

The Committee have had before them a report, dated Feb. 1st, 1921, from the acting Secretary of State, from the Civil Service Commission:

In accordance with the provisions of Cap. 67, 10-11 George V. "An Act to provide for the Retirement of Certain Members of the Public Service" the Civil Service has to report that Dr. P. H. Bryce of the Department of Health at Ottawa was recommended by the Deputy Minister of Health for retirement; that under Section 2 (3) of the said Act he was given a personal hearing, which has resulted in the Civil Service Commission now recommending that his appeal be not allowed, but that his retirement be made effective from the 1st of March, 1921. Dr. Bryce was born on August 17th, 1853, and is consequently sixty-seven years of age. He was appointed temporarily to the Service on Feb. 1st, 1904, and was made permanent on September 1st, 1908, and therefore will have been in the Service seventeen years and one month on the 1st March, 1921, the date upon which his retirement is proposed to be effective."

So it came about that I was retired in March, 1921, without any years being added to my term of Federal service, though I had been brought to Ottawa as an expert after 22 years in the Ontario Health Service, as is provided for in the Superannuation Act of 1870. Neither did I get any gratuity on leaving the Ontario Service after twenty-two years, the excuse being then given that I was improving my position.

The irony and injustice of this Order in Council will be seen when it is stated that a similar Order was passed on May 18th, 1921, retiring 231 persons from the Customs Department as being over sixty-five years of age; but which was recalled when the protests of the many friends of men who were faithfully performing their duties were made. These and hundreds of other Civil Servants of similar age are in different Departments still performing their duties.

In view, therefore, of all the facts herein recited I make my appeal for simple justice; that I be permitted to carry on my work as Chief Medical Officer of Indian Affairs, and I believe that I have the right to demand, after a thorough investigation into all the facts of the case, that the chief obstacle, as set forth in the story, to insuring the health and prosperity of the one hundred thousand Indians, the Wards of the nation, be removed.

Since the time of Edward I, the people have ever exercised their historic right to lay their petitions before the King and Parliament. I now desire herein respectfully to bring my appeal for the Indians of Canada before the King's representative and the Parliament of Canada, feeling sure that justice will be done both to them and to myself.

P. H. BRYCE