Northern Visions
Inuit Health Care, Vocational Training, and Social Change during the Early DEW Line Era

by

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Author’s Declaration

I hereby declare that I am the sole author of this thesis. This is a true copy of the thesis, including any required final revisions, as accepted by my examiners.

I understand that my thesis may be made electronically available to the public.
Abstract

The history of government-Inuit relations is complex and multifaceted. Military megaprojects have played a significant role in the development of government-Inuit relations and in the development of the North socially, economically, and culturally. This thesis examines the influence of the construction of the Distant Early Warning (DEW) Line on Inuit life, with a specific focus on Inuit health care, vocational training, and social change. It challenges the simple narrative of the DEW Line as a revolutionary force, arguing that the DEW Line affected areas of Inuit life to varying degrees. It examines government motivations and intentions and the execution of policies, revealing how the federal government’s intentions were not always realized in practice and that the individuals involved in implementing policy played a significant role in shaping and defining development in the North.
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List of Abbreviations

DEW Line – Distant Early Warning Line
DNANR – Department of Northern Affairs and National Resources
DNHW – Department of National Health and Welfare
DOT – Department of Transportation
EAP – Eastern Arctic Patrol
EMC – Eskimo Medicine Chest
FCC – Foundation Company of Canada
FEC – Federal Electric Corporation
FMP – Family Medicine Pack
HBC – Hudson’s Bay Company
IHS – Indian Health Services
NCC – Northern Construction Company
NSO – Northern Service Officer
RCAF – Royal Canadian Air Force
RCMP – Royal Canadian Mounted Police
USAF – United States Air Force
The question might also be asked: what right have we to tamper with the Eskimo way of life? The answer, and it is certainly an unsure one, is that we have already altered the original Eskimo culture very significantly, if unwittingly [...] However it is no more possible to prevent European influence than it is to dam a flood. The fact is that the culture has been affected and put into a state of instability so that it must inevitably move, though uncertainly and possibly in different directions.

Anthropologist J.D. Ferguson, 1957

“We don’t know or understand the ways of white men,” Kusagak, an Inuit elder from Coral Harbour, wrote in 1958. Before the “white man” arrived, “there was no food shortage,” and “there was polar bear, caribou, wolf, fox – any kind of animal…Now there were whites and Eskimos, and the caribou were fading away.” The North was full of white people. The store-keeper cannot trade things cheap now. Now the teacher scolds our children. Mothers and fathers do not approve of this. But perhaps this is necessary. They are doing what they think is best. But this is not approved by Eskimos…When bad things happen, we think of telling the Police or the Government. They come once a year and sometimes are told. But are we believed? We are told that we complain about things that are not important. We are told that the young Eskimos will have a much better life when they grow up and will [be] better than their elders … Now that the white man has changed our life, we need help … Older Eskimos used to teach young men how to hunt and how to divide food and how to judge the weather. The older women taught the young ones to sew. Nobody does that now and there are more Eskimos than there were before. There are no more caribou and we need skins for clothing. There are no more foxes. The Eskimos need help.  

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1 J.D. Ferguson, *A Study of the effects of the DEW Line upon the Eskimo of the Western Arctic of Canada*, (Ottawa: Northern Research Co-Ordination Centre, Department of Northern Affairs and National Resources, April 1957), 46.

Indeed, by the end of the 1950s, whites had arrived in the North.³

Two years prior, minister of Northern Affairs and National Resources Jean Lesage told readers of *The Beaver* magazine that Canadians needed “to accept the fact that the Eskimo [would increasingly] be brought … under the influences of [Southern] civilization.” Kugasak’s letter testified to the ongoing changes in the North and, because the effects of contact and government intervention could not be reversed, the government had a “moral responsibility” to provide Inuit with the “opportunity to participate freely in the life and activities of the nation.”⁴ Prime Minister Louis St. Laurent had “launched a new and sweeping policy for the development of the Canadian North” in 1953.⁵ Prospectors, entrepreneurs, and mining companies waited anxiously to exploit the region’s resources, while the advent of the Cold War, and growing tensions between the United States of America (US) and the Soviet Union (USSR), increased pressure on the Canadian government to build new Arctic defences.⁶ The 1950s witnessed an unprecedented investment in Northern development, which accelerated ongoing economic and social processes.

The Cold War placed Canada directly between two rival superpowers and the most direct route of attack from the USSR to the US flew over the Canadian Arctic. Given this geostrategic

³ For the purposes of this thesis, “North,” “Northern Canada,” “Canadian Arctic,” or any other variant thereof refers to the territorial North. In particular, this analysis is limited to the experiences of the Inuit within present-day Nunavut and the present-day Northwest Territories.
reality, the Canadian government faced increasing pressure from the US to increase military
defences in the North following the Soviet detonation of an atomic device in 1949 and the
outbreak of the Korean War in 1950. Furthermore, Canadian and American defence analysts
speculated that the Soviet Union was “approaching technological parity” in bombers and atomic
weapons. Thus, advanced warning of incoming attacks from the North became essential,
providing enough time for the American and Canadian military to mobilize their deterrent. First,
Canada and the US agreed to build the Pinetree Line in 1953. Strategists recognized that this
series of thirty-three radar stations across the mid-north, spanning from Vancouver Island to
Labrador, was insufficient even before its completion in 1954. The implications of this
assessment were heightened after the USSR detonated its first hydrogen bomb in 1953.
Following this demonstration of power, Brooke Claxton, the Minister of National Defence, and
US President Eisenhower agreed to build radar lines farther northward to increase warning times.
This effort resulted in agreements in June 1954 to construct the Mid-Canada Line and in
November 1954 to build the Distant Early Warning (DEW) Line.

The DEW Line ran from Alaska to Labrador along the 70th parallel and numbered
twenty-two radar stations. By the time construction ended in 1957, 1.25 million tonnes of heavy
machinery and 75 million gallons of petroleum had been imported into the Arctic by land, sea,
and sky. Hundreds of boats and planes carried building sections, steel towers, oil drums,
electronic equipment, paint, wood, wire, and other construction materials to the remote Arctic

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7 Coates et. al, *Arctic Front*, 68.; In 1940, at the start of the Second World War, Canada and the US signed the
Ogdensburg Agreement which provided for “the shared defence of North America. The Americans were particularly
concerned about the security of Alaska…and the overland and air routes to their northernmost territory.” Prior to the
Second World War, the North seemed naturally defensible and impenetrable, because the region was “cold and
icebound for most of the year, and no nation on earth had the capacity to move quickly across the land and frozen
waters to pose any real threat to southern Canada.” American fears were justified in July of 1942, however, when
the Japanese managed to capture the Aleutian Islands of Attu and Kiska off the coast of Alaska. Consequently, US
and Canadian officials could no longer rely on simple geography to protect the North. Coates et. al, *Arctic Front*, 53-55.
8 Coates et. al, *Arctic Front*, 68-70.
locations. The flurry of activity resulted in frequent contact between Qallunaat and Inuit communities. Inuit families congregated around the new radar sites seeking employment, aid, and access to supplies. The interaction between DEW Line officials, military personnel, government officials, and Inuit profoundly influenced economic and social developments in Inuit society. The DEW Line “caused the same ‘temporary boom and bust conditions as other military and federal development projects, but with more sweeping effects.’” In 1957, the USSR successfully launched Sputnik, their first artificial satellite, into orbit – a signal that it could also send nuclear warheads to North America using intercontinental ballistic missiles. This redirected American and Canadian efforts towards addressing this new threat (and to winning the space race). Although the DEW Line continued to operate after 1957, half of the radar stations were decommissioned in 1964. Nonetheless, the economic changes which occurred as a result of DEW Line construction and Northern development profoundly influenced Inuit life.

Traditionally, Inuit lived “a seasonally nomadic subsistence-oriented way of life, reliant on a variety of naturally occurring animal and mineral resources, and organized around communities of small kin groups.” Explorers, whalers, and fur traders began changing Inuit economic and survival practices, as Inuit shifted their focus “from subsistence hunting to commercial trapping by the late nineteenth century.” Some Inuit began spending long periods of the year near trading posts where they could exchange their furs for European goods; however,

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9 P. Whitney Lackenbauer, and Peter Kikkert, “Cambridge Bay and the Military: A Living History,” manuscript in progress. Thanks to the authors for permission to draw upon their draft study.
10 “Qallunaat” is an Inuktitut term that refers to non-Inuit people.
12 Coates et. al, Arctic Front, 75.
many Inuit families continued to a mostly traditional and semi-nomadic life until the Second World War.\textsuperscript{14}

The Japanese capture of the Aleutian Islands Attu and Kiska in July 1942 drew attention to the vulnerability of the North. In response to the attack, Canada and the US undertook the construction of a series of military defence projects in the Canadian North: namely the Alaska Highway, the Northwest and Northeast Staging Route, the Canol project, and weather stations.\textsuperscript{15} These projects “created centres where Inuit could obtain employment, medical services and often trade goods, thereby encouraging the development of sedentary communities.”\textsuperscript{16} The construction of the DEW Line accelerated these processes, significantly changing the Inuit economy. The increased availability of wage labour fueled the development of consumerism and many Inuit employed by the DEW Line were unable to return to the hunting and trapping life after losing their equipment, dog teams, and skills.

The influences of the DEW Line were not confined to the individual Inuit directly employed on the Line. Inuit women, for example, found their work in high demand as southern workers sought out Inuit-made articles of clothing or other handicrafts. Non-Inuit construction workers often bought \textit{kamiks} (moccasins) as souvenirs or skin parkas to combat frigid winter

\textsuperscript{14} Sarah Bonesteel and Erik Anderson, \textit{Canada’s Relationship with Inuit: A History of Policy and Program Development} (Ottawa: Indian and Northern Affairs Canada, 2008), 9. The term “traditional” will be used to refer to the state of Inuit practices prior to large-scale interaction with Euro-Canadians. For most regions, large-scale interaction with Euro-Canadians did not occur until the Second World War or later. The term “modern,” “modernization,” or any variant thereof refers to the process of adopting the predominant Southern-Canadian standards and understanding of Canadian culture, society, and economy.


\textsuperscript{16} Bonesteel et. al, \textit{Canada’s Relationship with Inuit}, 10.
temperatures.\textsuperscript{17} The sale of Inuit handicrafts provided an additional source of income for Inuit families. Furthermore, the expansion of the administration created new employment opportunities for the Inuit. For example, the Department of Transportation, the RCAF, and the RCMP employed Inuit. One Inuk lived “as a European” at the Department of Transportation station where he was employed as a radio operator.\textsuperscript{18} The RCAF also employed Inuit as general labourers, maintenance workers, bulldozer operators, and truck drivers.\textsuperscript{19}

The construction of the DEW Line had a profound influence on the development of Inuit society, culture, and economy, but its influence varied across aspects of Northern life. While the employment prospects related to the radar network accelerated the growth of Inuit vocational training programs and effected tremendous social change, the DEW Line had little effect on the delivery of Inuit health care and the development of the health care system. Indeed, my re-evaluation of the evidence highlights the limitations of the DEW Line’s influence. The network did not rapidly transform all aspects of Inuit life, nor did it significantly affect every Inuit community and individual directly and immediately. Those who were touched by the influences of the DEW Line found themselves pushed irrevocably onto the path of modernization and integration, however, and the social consequences of the 1950s have been felt across generations. Therefore, although the DEW Line did not begin the process of economic and social change in Inuit society, it provided justification for increasing Northern development and accelerating the process of acculturating and integrating Inuit into the larger Canadian society.

There is a significant amount of scholarly literature examining the influence of military projects on the North. Journalist Kevin McMahon’s \textit{Arctic Twilight: Reflections on the destiny of...}

\textsuperscript{17} LAC, RG 85, Northern Affairs Program, Volume 2272, File A1009-1, Part 7, W.R. Biggar, “Re: Dew Line Project – Effects upon the Eskimos,” 24 August, 1955, 1.; J.D. Ferguson, \textit{A Study of the effects of the DEW Line upon the Eskimo of the Western Arctic of Canada}, (Ottawa: Northern Research Co-Ordination Centre, Department of Northern Affairs and National Resources, April 1957), 15.

\textsuperscript{18} Ferguson, \textit{A Study of the effects of the DEW Line upon the Eskimo of the Western Arctic of Canada}, 12.

\textsuperscript{19} Ferguson, \textit{A Study of the effects of the DEW Line upon the Eskimo of the Western Arctic of Canada}, 12-13.
Canada’s northern land and people explores the influences of technology and military projects, such as the DEW Line, on Inuit social and cultural development. McMahon described the construction of the DEW Line as a government and military project to secure Canadian sovereignty. The military “swept over the Arctic … like an iron cloud, carpet bombing the [North] with boxes…decade after decade…the skies rained boxes. The sky rained boxes still.”

McMahon argued that the “boxes” formed the foundation of the Canadian government in the North and that the introduction of modern technology changed Inuit society, introducing “various virtues and vices, machines and organizations, ideals, morals, values and goals.”

Historians Matthew Farish and P. Whitney Lackenbauer’s article, “The Cold War on Canadian Soil: Militarizing a Northern Environment,” examined the construction of the DEW Line within the framework of “military modernization” and environmental history. Farish and Lackenbauer asserted that the military and government used the DEW Line to modernize the North, rendering “a complex landscape legible [while making] the process comfortable for southern visitors and workers.” Officials gave “little consideration [to] the ways in which the Line was radically altering the human and physical geographies of the North, confirming once more an unfortunate correlation between toxins and race in North American environmental history.”

21 McMahon, Arctic Twilight, 11.
Scholars have also examined government policy towards Inuit, paying significant attention to the intentions, motivations, and objectives of Inuit policy. Journalist John David Hamilton’s *Arctic Revolution: Social Change in the Northwest Territories, 1935-1994*, examined the political and administrative developments, such as political appointments and bureaucratic changes, which affected social change among Inuit.24 Geographer Quinn Duffy’s important work, *The Road to Nunavut: The Progress of the Eastern Arctic Inuit since the Second World War*, argued that the Canadian government approached Inuit policy through a lens of paternalism.25 The Canadian government became guardians to Inuit by performing “normal parental tasks of providing shelter, health care, and education for the people of the Arctic, [bringing] modern Inuit into a modern, technologically oriented economy, and finally [encouraging] the Inuit to take responsibility for the running of their own affairs.”26 Historian Shelagh Grant, in *Sovereignty or Security: Government Policy in the Canadian North, 1936-1950*, argued that the government’s pre-war, *laissez-faire* approach to Inuit policy shifted to one of active intervention in response to the desire to exert authority, maintain law and order, and protect Canada’s claim to Arctic sovereignty.27 Native studies scholar Peter Kulchyski and sociologist Frank Tester’s *Tarmmarniit: Inuit Relocation in the Eastern Arctic, 1939-63* adopts the theory of totalization to frame the government’s Inuit policy.28

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26 Duffy, *The Road to Nunavut*, xxiii.
28 Tester and Kulchyski define totalization as the process of assimilation, in which the “state became a critical agent in the struggle to incorporate Inuit into dominant Canadian society.” They also describe totalization “a process of consciousness, a way in which consciousness apprehends the world.” Frank Tester and Peter Kulchyski, *Tarmmarniit: Inuit Relocation in the Eastern Arctic 1939-63* (Vancouver: University of British Columbia Press, 1994), 4-5.
By contrast, anthropologist David Damas’ *Arctic Migrants/Arctic Villagers: The Transformation of Inuit Settlement in the Central Arctic* offered a complex explanation of government policy in his examination of Inuit settlement patterns in the central Arctic during the 1950s and 1960s. Rather than simplifying government actions and attributing historical developments to a single factor (such as paternalism, sovereignty concerns, or totalization and assimilation), Damas argued that government policy often worked at cross-purposes and was complicated by financial realities and Inuit agency. While the government did impose relocation policies on certain Inuit communities, Inuit settlement also resulted from voluntary migration owing to pull factors such as health, education, housing, and wage employment opportunities. Ultimately, his examination of government policy and its execution characterizes government policy as humanitarian in its intent, paternalistic in its application, and heavily guided by financial considerations.29

In addition to military and political histories, scholars have also paid significant attention to issues in Inuit health care. George Wherret’s *The Miracle of Empty Beds* chronicled the history of tuberculosis in Canada, situating the Inuit experience within the larger national narrative,30 while Pat Sandiford Grygier’s *A Long Way from Home: The Tuberculosis Epidemic among the Inuit* recorded the first-hand experiences of Inuit patients.31 Recent scholarship concerning Inuit health care has further diversified the existing literature in disciplinary background, approach, and subject matter. For example, historian Judith Bender Zelmanovits’ article “Baby Rats and Canada’s Food Rules: Nurses as Educators in Northern Communities”

North. Nevertheless, few works comprehensively examine the relationship between government policy, health care delivery, and individual experiences in the North.

Despite the growing body of literature on Inuit history, there is still a general lack of literature on Inuit vocational training and Inuit childhood education. Richard J. Diubaldo’s chapter, “You Can’t Keep the Native Native,” focused primarily on economic policy and the motivations and intentions behind government action. Ann Vick-Westgate offered one of the first substantial evaluations of Inuit childhood education in *Nunavik: Inuit-Controlled Education in Arctic Quebec*. Finally, Heather McGregor examined non-Inuit relations in the education system, arguing that the government had to meet Inuit objectives because the system failed to encourage self-determinism, positive self-identity, or economic self-sufficiency.

This thesis attempts to combine an analysis of government policy with an examination of the actual experiences of individuals experiencing and witnessing change in the North during the early DEW Line era from 1950 to 1960. The study relies primarily on government correspondence, reports, and personal memoirs of contemporary government officials and medical professionals. It must be noted, however, that the primary perspective presented in this study is that of the Qallunaat. Although an Inuit perspective has been incorporated whenever possible, there are a limited number of translated and transcribed interviews with Inuit who experienced the changes during this era. The language barrier presents another source bias, as all of the interviews used in this study were translated from Inuktitut to English and some meaning

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may have been lost in translation. Therefore, the first and second chapters primarily discuss the changes (or lack of change) occurring in the North as a result of DEW Line construction from the perspective of Qallunaat officials, while chapter three analyzes published transcripts of interviews with three Inuit women.

Chapter one examines the development of the Inuit health care system and actual health care delivery in the North. Government documents provided insight as to what motivated the federal government into acting and what the government’s objective was in creating health programs and policies. Additionally, memoirs of health care practitioners facilitate an examination of the actual lived experience of the individual nurses and doctors who were affected (or unaffected) by government policy. The evidence reveals the limited effect of the DEW Line on Inuit health care. Although the DNHW and the DNANR hoped that the construction of the DEW Line would improve health care delivery and accessibility to the many remote and isolated Inuit communities, constraints outside of the government’s control limited the departments’ ability to effectively expand the Northern health care system. Consequently, the personal experiences of medical professionals who served in the North informed later government policies. Because the government was unable to effectively implement its Inuit health care policy, Northern doctors and nurses had to adapt to the local conditions and situations, making do with the resources available to them. Overall, the DEW Line did not significantly impact the delivery of health services to the Inuit, but the individual efforts of Northern nurses and doctors contributed to an overall improvement in Inuit health and welfare.

Chapter two charts the influence of the DEW Line on the expansion of Inuit vocational training programs. It focuses on government policy and the intentions and motivations behind vocational training, relying primarily on an analysis of government documents. Vocational
training programs for Inuit existed prior to the construction of the DEW Line, but they tended to be limited in nature and scope, providing on-the-job training to one individual at a time. The DEW Line project, however, reinforced the belief that the Northern economy was modernizing and that a new wage economy would soon replace the traditional hunting and trapping economy. The government attempted to prepare Inuit for this new economy by expanding the vocational training program. Inuit trainees learned the mechanical and technical skills valued in wage economies, as well as the social and cultural norms of Southern Canada. Accordingly, the vocational training programs served as a conduit to prepare Inuit for social integration into larger Canadian society. The construction of the DEW Line and the opportunities it afforded played a significant role in expanding the vocational training program for Inuit.

Chapter three uses a combination of government correspondence, reports, memoirs, and oral history to examine the social change that occurred within Inuit society as a result of DEW Line construction and the consequential expansion of administration. The construction of the DEW Line and expansion of the administration increased the accessibility of the Inuit as families and communities settled semi-permanently and permanently in settlements near each new site and administrative centre. This ultimately enabled the government to monitor and interfere with Inuit social practices such as marriage and adoption. Perhaps more significantly, the transition from a traditional Inuit economy to the modern wage economy challenged the fabric of traditional Inuit society and culture. Traditional social relationships and hierarchies were upset and the markers of success shifted from valuable hunting skills to an individual’s income. Traditional family roles changed as men, and economic work, detached itself from the family unit, leaving women and children in the home with little to contribute to the new economy. The erosion of the traditional economic family unit resulted in a loss of traditional education, which
the government replaced with a formal school system that emphasized the knowledge required to survive in the new wage economy. The social implications wrought by the DEW Line changed Inuit society, encouraging the abandonment of traditional life for integration into a new modernized Northern environment.
Ayonamut. It can’t be helped. It was to be our business to try, in this small wedge of the Arctic, to alter this expression. Perhaps gradually, very gradually, we could introduce changes that would lead eventually to the introduction of a new word meaning ‘it can be helped.’ That must be our motto.

Donalda M Copeland and Eugenie L. Myles, *Remember, Nurse* (1960)

When nurse Dorothy Knight arrived at the Inuit encampment near the Islands of God’s Mercy, in 1958, three survivors and four corpses greeted her. The outbreak, which Dorothy guessed was either botulism or trichinosis, claimed the lives of the first two men four sleeps prior to her arrival, another man died three sleeps before her arrival, and the last man died soon after. In the harsh Arctic environment, where the delivery of health care depended on favourable weather conditions, Dorothy had come too late. “Ayonamut, she thought. Even after a year in this harsh land, it was difficult for her to accept the implacable Eskimo philosophy – it can’t be helped; the pattern of life and death can never be altered.”

Dorothy’s sense of helplessness was not unique to her individual experience. Numerous doctors and nurses found themselves struggling to understand and overcome the fatalistic Inuit philosophy, Ayonamut. Coming a year after the completion of the DEW Line, Dorothy’s experience echoed that of her pre-DEW Line

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37 Dorothy Knight served in Lake Harbour from 1957 to 1958 as a public health nurse. She applied for a position with Indian and Northern Health Services after seeing an ad in the *Canadian Nursing Journal*. She wanted to work “in the wilderness with the Indians,” but was stationed in the Arctic instead. Dorothy received her training in Sarnia and had five years’ experience as a registered nurse prior to her work among the Inuit. She accepted the position at Lake Harbour out of pure curiosity about the Inuit and about the Canadian North. Betty Lee, *Lutiapik* (Toronto: McClelland and Stewart Limited, 1975),15-16;
38 In Dorothy Knight’s biography time is measured in sleeps and not days, because that is the unit of measurement used by her guide and by the other Inuit in the Lake Harbour community. Lee, *Lutiapik*, 9-13.
39 There are two common spellings for this phrase: “Iyonamut” and “Ayonamut.” The Inuktitut refers to the Inuit philosophy of death being unstoppable. It has been translated in memoirs and biographies to mean “it can’t be helped,” or “that’s just the way things are.” Lee, *Lutiapik*, 13.
predecessors: treatment and medical help remained inaccessible, the shortage of medical practitioners persisted, construction on proposed hospitals had yet to commence, and the overall health status of the Inuit seemed largely unaltered.

The DEW Line did not directly revolutionize administration and delivery of health services in the North. Nevertheless, the construction of the DEW Line necessitated an expansion of administration in the North, which indirectly influenced the development and expansion of health policy and practice among the Inuit. In the early 1950s, the greatest threat to Inuit health and welfare seemed to be imported illnesses from Southern Canada, particularly tuberculosis and poliomyelitis. Southern illnesses, which had not previously existed in the North, suddenly appeared and behaved in unconventional ways. The dangers and risks involved in conquering the last frontier and opening up the North were evident. Thus, the government relied upon the experiences of mid-century northern health care practitioners to frame their health policy and practice among the Inuit during the construction and early maintenance phase of the DEW Line.

In the initial stages of construction, the Department of Northern Affairs and National Resources emphasized personal hygiene and sanitation in Inuit communities as a method of disease prevention and social integration. Attempts to improve Inuit hygiene and sanitation persisted throughout the 1950s and early 1960s. Recognizing that these preventative measures were insufficient, the Department of Northern Affairs and National Resources (DNANR), the Department of National Health and Welfare (DNHW), and the Federal Electric (FEC) Company collaboratively ensured that all construction personnel completed and passed a medical examination before travelling to the North for employment. The DNANR and the DNHW additionally sought to increase the number of health care facilities in the region, which in turn

would make health care more accessible and meet the needs of the growing non-Inuit population. Simultaneously, these health care facilities could, in theory, also serve the Inuit population. The effectiveness of government policies and objectives, however, was limited by financial constraints, the lack of human resources, the continued spread of disease to Inuit settlements, environmental obstacles, and cultural differences between non-Inuit and Inuit community members. As a result of the limited means, many northern health care practitioners adjusted to the local situation and modified their roles to deliver effective health care in their communities. Many practitioners proceeded to use their personal experiences and expertise to influence policy decisions. Although the DEW Line did not revolutionize the delivery of health care in the North, its creation drew attention to the health needs of the Inuit, provided a rationalization to increase the number of health care practitioners and medical facilities in the North, and contributed to improved Inuit health. In short, the expansion in Northern administration that accompanied the radar network ultimately accelerated the expansion of Northern health services for Inuit communities.

**Pre-DEW Line Conditions**

The immediate years leading up to the construction of the DEW Line reaffirmed the government’s belief that Qallunaat-Inuit interactions posed a significant threat to the health and welfare of the Inuit. For example, in the autumn of 1949, the uncharacteristic behaviour of an outbreak of acute anterior poliomyelitis (polio) in the Eastern Arctic drew widespread attention from Canadian officials. First, the outbreak occurred in the isolated, sparsely settled area around Chesterfield Inlet, which had never been the site of previous polio cases. Second, contrary to outbreaks in Southern Canada, this epidemic reached its height in winter and developed in a markedly different fashion, spreading rapidly and killing swiftly. Between February 20 and
March 2, 1949, the Inuit community at Chesterfield Inlet experienced fourteen deaths and thirty-nine cases of paralysis out of total Inuit population of 275. The DNHW charged the Indian Health Services (IHS) branch with the responsibility of investigating the outbreak, which hired J.D. Adamson, J.P. Moody, A.F.W. Peart, R.A. Smillie, J.C. Wilt, and W.J. Wood to conduct a study.\(^{41}\)

The investigative team attributed the “explosive” and “devastating” nature of the outbreak at Chesterfield Inlet to isolation and unsanitary conditions. Inuit in the region did not come into regular contact with non-Inuit and thus had low level of resistance to the illness. Additionally, Inuit following a seasonal cycle frequently “crowd[ed] into camps and in igloos” during the winter, meaning “less ventilation and long hours of intimate contact.” These conditions facilitated the rapid spread of illness. Finally, the medical experts believed that the tendency of the Inuit to congregate about the Post, the Mission, and the hospital was a primary contributing factor to the rapid rate of infection.\(^{42}\)

While these factors accelerated and aggravated the rate and range of infection, the troubling reality lay in its origin. The medical team believed that the infection originated in Churchill, where several hundred workmen and military troops had been employed the previous summer. On July 8, 1948, a member of the Royal Canadian Air Force (RCAF) was flown to Winnipeg where he was diagnosed with poliomyelitis. In September the first Inuit case of polio appeared in Nunella, 75 miles north of Churchill. The illness could have been transmitted to

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\(^{41}\) J.D. Adamson, J.P. Moody, A.F.W. Peart, R.A. Smillie, J.C. Wilt, and W.J. Wood, “Poliomyelitis in the Arctic,” in *Canadian Medical Association Journal* 61, no. 4 (October 1949): 339-343; J.D. Adamson was the Director of the Department of Medicine at the University of Manitoba and Director of Medicine at Deer Lodge Hospital; J.P. Moody was the Field Medical Officer in the Eastern Arctic, hired by Indian Health Services; A.F.W. Peart was the Chief of the Division of Epidemiology under the Department of National Health and Welfare; R.A. Smillie was a Major of the Royal Canadian Army Medical Corps and Command Hygiene Officer; J.C. Wilt was an Assistant Pathologist at Winnipeg General Hospital; and W.J. Wood was the Regional Superintendent for Indian Health Services. Adamson et al., “Poliomyelitis in the Arctic,” 339.

\(^{42}\) Adamson et al., “Poliomyelitis in the Arctic,” 343.
Nunella through the routine stop-over of summer boats in the region, or through Tutu, an Inuit who visited the settlement while travelling from Churchill back to his home in Eskimo Point. Soon after Tutu’s visit to Eskimo Point, the first symptoms of polio appeared in that community. Inuit from Eskimo Point subsequently visited the camps in Padlei. Then a group of Inuit from Kazan visited Padlei and, within a week, polio appeared in the Kazan community. This case demonstrated how quickly illness and disease could spread among the Inuit due to lack of immunity in combination with the social and nomadic nature of Inuit communities. Even a single instance of contact with non-Inuit, followed by a series of Inuit-Inuit interactions, facilitated the spread of a deadly and debilitating disease. Thus, by 1950, the dangers of exposing isolated Inuit communities to Qallunaat-Inuit contact were abundantly clear.

With increasing interest in the North in the early Cold War era, the Canadian government took initial – albeit limited -- steps to ensure the health and welfare of the Inuit. By 1953, conditions seemed to have improved. Although there had been fifteen cases of trichinosis and seven resultant deaths that year, Dr. Moore reported that no other serious epidemics, resulting from “outside contacts,” had occurred. The improved condition of Inuit health likely resulted from new Departmental initiatives. For example, the IHS hired three male nurses and posted them to Northern nursing stations to increase the number of health care practitioners in the North, and the Royal Canadian Mounted Police (RCMP) were required to take pre-medical courses before they were stationed in the North. Finally, the government widened the

43 Adamson et al., “Poliomyelitis in the Arctic,” 341-342.
44 Dr. Moore, the Director of Indian and Northern Health Services, noted that there had been an influenza outbreak at Fort Chimo, Frobisher Bay, Cape Dorset, and Pangnirtung, but stated that the epidemic “had been successfully coped with” and warranted no further concern or alarm. LAC, RG85, Northern Affairs Program, Series D-3-a, Volume 743, File 1012-1, Access Code 31, Part 2, “Minutes of the Third Meeting of the Committee on Eskimo Affairs Held Tuesday, October 20, 1953, in Room 304, Langevin Block, Ottawa,”4-5.
45 Due to the scarcity of medical services in the North, the RCMP officers delivered temporary care until further medical help could be obtained. Thus, it was important for them to have a basic understanding of first aid principles. LAC, RG85, Northern Affairs Program, Series D-3-a, Volume 743, File 1012-1, Access Code 31, Part 2, “Minutes
geographic scope of their tuberculosis (TB) detection and treatment program. They continued to use the Eastern Arctic Patrol (EAP) as a means of administering and delivering medical check-ups and collecting x-ray scans in the North. This reflected a conscious effort by the IHS to improve Inuit health and Northern health services in the early 1950s; however, the shortage of adequate medical facilities and personnel persisted and serious diseases and illnesses continued to claim the lives of vulnerable Inuit.

**Government Policy and Intent**

When DEW Line construction commenced in 1955, the Canadian government tried to minimize the negative effects of Qallunaat-Inuit interaction, promoting personal hygiene and sanitation to prevent disease and encourage social integration into Canadian society. In particular, the problem of lice in Inuit communities received significant attention. Recognizing that Inuit communities would likely be exposed to non-Inuit military or civilian personnel, the government attempted to minimize infection through the use of restrictive policies and preemptive measures, such as regular medical examinations. Finally, the early DEW Line construction period revealed the need for more Northern medical facilities and services. Therefore, although the government started implementing policies and programs meant to

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46 In 1953, the EAP collected 600 x-ray plates on the northern half of the trip alone. LAC, RG85, Northern Affairs Program, Series D-3-a, Volume 743, File 1012-1, Access Code 31, Part 2, “Minutes of the Third Meeting of the Committee on Eskimo Affairs Held Tuesday, October 20, 1953, in Room 304, Langevin Block, Ottawa,” 5.

47 In November of 1953, the Maguse River communities experienced an outbreak of polio. Of the fifty Inuit, eleven contracted polio and three died. As was the case in 1949 at Chesterfield Inlet, the origin of the outbreak seemed to be Mr. Jasper from Southampton Island, who had recently visited Chesterfield Inlet and Eskimo Point while working with the RCMP. LAC, RG85, Northern Affairs Program, Series D-1-A, Volume 1474, File 252-3, Access Code 31, Part 1, H.V. Johnsen to Dr. W.J. Wood, “Polioimmunisation, Maguse River, NWT,” 23 November, 1953, 1, 2, 1.; Those who died were from Southampton Island, where little immunity existed. LAC, RG85, Northern Affairs Program, Series D-1-A, Volume 1474, File 252-3, Access Code 31, Part 1, W.J. Wood to The Director, 26 November, 1953.
improve Inuit health in the early 1950s, DEW Line-related activities amplified Inuit health concerns and accelerated the process of improving health services in the North.

**Personal Hygiene and Sanitation**

Northern medical practitioners documented what they perceived to be shortcomings in Inuit personal hygiene and poor sanitation in Inuit homes. Donalda Copeland, a northern nurse stationed in Coral Harbour in 1951, asked herself how Inuit could live healthily when fourteen people crowded into a “squalid room,” no bigger than twelve by fifteen feet.\(^{48}\) She noted that, during an influenza outbreak, she and her family, being “better nourished” and having “superior living conditions,” recovered sooner than the “luckless” Inuit she treated.\(^{49}\) Harold, Donalda’s husband and the local school teacher, remained optimistic. He believed that the key to improved living conditions lay with educating Inuit children, encouraging a “more healthful way of living” that would lead to an improved standard of living.\(^{50}\)

Although health care workers emphasized sanitation as a method of disease prevention, their early, localized efforts did little to resolve issues of poor personal hygiene and sanitation more generally amongst the Inuit population. Accordingly, personal hygiene and sanitation became a part of DEW Line employment policy. In May 1955, R.D. Van Norman visited the Inuit camps in the Frobisher Bay area and reported the poor condition of the Inuit settlement near the base. As the snow melted, the spring “revealed the usual mess of garbage and waste.

[Constable] Deer has told the Eskimos that since they have been responsible for the mess, that

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\(^{49}\) Copeland et al., *Remember, Nurse*, 45.

\(^{50}\) Harold took it upon himself to instill a cleansing routine in school. Prior to the start of the school day, the children had a “wash-up period.” Ooyarak, the school caretaker, melted snow into water, heated the water, and laid out soap dispensers with soap that worked as a detergent and antiseptic. The children were then expected to wash themselves. Copeland et al., *Remember, Nurse*, 57.
they must clean it up. This may sound easy, however, it is an extremely difficult task."  

Van Norman believed that, in order to improve the conditions of the Inuit settlements, government officials had to “imbed in the natives a desire to keep their homes and grounds free of refuse. At present they do not see any need for this, therefore it seems to me that they must be educated to want this standard of cleanliness, and to realize that it is an obligation to an ideal.” The government viewed the issue of sanitation as a new obstacle for the Inuit. The government paid heed to the message that Inuit had to be taught to value cleanliness and sanitation. Only then, the prevailing logic held, would Inuit embrace the practice of living in clean and healthy environments. Therefore, the Government began by teaching the benefits and values of personal hygiene and cleanliness to Inuit employed on the DEW Line -- the most readily accessible Inuit.

The Government and the construction companies made a direct effort to teach Inuit the importance of sanitation at each individual site. By July 1955, nearly every DEW Line site employed Inuit who ate, lived, and washed with their Qallunaat counterparts. By incorporating exercises in personal hygiene and cleanliness into a daily routine, the government hoped to

51 R.D. Van Norman was the Northern Service Officer for the Foundation Company in the Eastern Arctic. He attributed the clutter and mess of the settlement with the sudden intrusion of military projects and supplies. Van Norman stated that prior to the establishment of an air base in the area the Inuit lived in “primitive houses” and were dependent upon hunting and trapping for food and materials. The introduction of wage employment and military dump sites meant that the Inuit had access to new materials and possessions. They collected scrap lumber and other things that had been discarded by the base, but only used a small percentage of what they collected and left the rest scattered about their settlement. LAC, RG85, Northern Affairs Program, Series D-1-A, Volume 1120, File 1000/169, Access Code 31, Part 4, R.D. Van Norman, “Re: The Sanitary Control, Prevention of Disease and General Welfare of Eskimo Villages and Camps in the Frobisher Bay area, Northwest Territories,” 30 May, 1955, 1-3.


normalize the concept and practice for Inuit employees who, ideally, would then pass the practices on to their family and community members.54

The issue of sanitation gained importance in the ensuing years. By 1960, the government recognized sanitation as a mark of class and a status symbol. John S. Willis, Chief of the Northern Health Division, argued that:

[t]he Eskimo male who does not bathe is still a man amongst men. His eye is clear, his head is high and his dignity remains intact, even if he sometimes smells. So long as he remains with his own people and they all smell together, this state of dignity will remain. But …[i]t is not partly on the basis of his lack of sanitary facilities and knowledge of personal hygiene that most Canadians – shamefacedly perhaps – would have to admit that they think of him (if they think of him at all) as a ‘second class citizen’? And yet it is instructive to observe how readily those Eskimos who have been brought to Southern Canada for medical treatment, education or employment have taken to bathing, clean clothes and deodorants. It would be interesting to find out whether or not any of those who have returned to the old ways ever miss the hot and cold running water and the feeling of almost total immersion in soap suds.55

The attempts of medical practitioners to improve Inuit health and sanitation at the local level directly reflected the objectives of the Government. Working as a DEW Line doctor, Dr. Gareth Howerd encountered issues of poor personal hygiene and sanitation on several occasions.56 For example, when attending a movie screening, Dr. Howerd observed that construction workers and military personnel avoided sitting next to the Inuit attending whenever possible. He soon discovered that this apparent act of segregation “had nothing to do with a colour bar- it was simply that [the Inuit] sat there and smelled powerfully in their dirty

56 Dr. Howerd was hired by the Federal Electric Company as a DEW Line doctor. Although Dr. Howerd never explicitly states the date of his arrival and departure from the Canadian Arctic, it can be inferred that he served on the DEW Line between 1955 and 1957. He accepted his contract after DEW Line construction commenced and his contract ended just as DEW Line construction came to a close. Dr. Howerd immigrated to Canada from Britain, where he had previously served as a doctor in the Merchant Navy. He became fascinated by the DEW Line within the first few weeks of his arrival in Canada and applied for the position in December. Dr. Howerd was stationed at Baffin Base and charged with the responsibility for treating DEW Line employees, although he occasionally treated non-employed Inuit as well. Gareth Howerd, Dew Line Doctor (London: Robert Hale Limited, 1961), 17-18, 22, 47, 48.
clothes.” When Dr. Howerd visited the “Old Settlement” a mile away from Baffin Base, he discovered “primitive shacks” which reminded him “of disintegrating garden huts … No wonder, I thought, the Government are moving the Eskimos from these hovels to wooden houses in the new township of Frobisher Bay.”

During his time on the DEW Line, Dr. Howerd encouraged better hygiene and sanitation and, like Donalda and Harold Copeland, focused on children. A young Inuit boy, Elijah, had been taken to Frobisher Bay for treatment of pneumonia. While he was there, Dr. Howerd showed him how to use a tooth brush and, when Elijah left, the doctor gave him a new tooth brush and some tooth paste and instructed Elijah to brush every day. When Dr. Howerd visited Elijah several weeks later, he “asked Elijah how he was and if he remembered all I had taught him at Frobisher … He smiled widely and showed me [his teeth]. They were not as white as they had been when he left Frobisher, but I had to admit they looked pretty healthy.” Thus, in promoting personal hygiene and sanitation at a local and individual level, Northern medical practitioners acted in accordance with government priorities and objectives.

**Lice**

Lice proved to be a persistent pest among Inuit, serving as evidence of unhygienic lifestyles and, the government believed, acting as an obstacle to Qallunaat accepting Inuit as equal citizens. B.G. Sivertz, Chief of the Arctic Division and Deputy Minister of the Northern Administration and Lands Branch, expressed his concern over the issue in November 1955: “the Eskimo people are coming much in contact with white people, especially in employment on the

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60 Lice also posed certain health risks to the Inuit, as those with lice were more susceptible to developing scabies and contracting louse-borne diseases like typhus. LAC, RG85, Northern Affairs Program, Series D-1-A, Volume 384, File 252-1-4, Access Code 31, Part 1, G.W.R. to the Deputy Minister, “Native Welfare,” 8 November, 1955.
Dew Line and elsewhere. This whole program could be jeopardized by antipathies generated over such things as lice.” While nurses, northern service officers, policemen, missionaries, and post managers could administer DDT powder to Inuit and eradicate an infestation of lice, this was only a short-term solution. Sivertz believed that changing the habits of the Inuit was the ultimate solution. By placing “responsibility for personal hygiene ... on the individual himself,” an Inuk could find motivation in public opinion and in personal comfort.61

Sivertz’s colleagues shared his beliefs, and the efforts of administrators and northern government representatives revealed their desire to encourage Inuit to take responsibility for personal hygiene. When hiring Inuit men for DEW Line employment, R.D. Van Norman discussed the issue of lice with each individual Inuk before sending them to a station. He “simply told the Eskimo lads that the white employees in these camps disliked lice as much as the Eskimo did, and that they would not tolerate them.”62 The eradication of lice seemed to be an imperative measure in preparing Inuit for DEW Line employment. Furthermore, personal hygiene and sanitation served as a status symbol and as a representation of civility. If Inuit were to engage in wage employment and become equal citizens of Canada, then they had to meet the hygienic and sanitary standards of all other Canadians. Promoting personal hygiene and sanitation additionally served to prevent the spread of illness and disease.

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DEW Line Preventative Policy and Treatment

The Canadian government recognized that the spread of disease from Qallunaat to Inuit civilians also remained a threat.63 Potential outbreaks of influenza, measles, mumps, coryza, and polio concerned government officials and medical practitioners alike. Thus, government policy mandated medical examinations for all transient, Qallunaat employees before they travelled to the North.64 Officials were also concerned about the spread of illness from Inuit to non-Inuit employees. While medical officials knew which diseases posed a threat to Inuit, officials feared that Inuit might have pathogenic worms, such as Echinococcus, or enteric infections that they could pass on to Qallunaat. Furthermore, their dogs might be carriers of pathogenic worms or rabies. In response, J.A. Hildes, the Director of the Arctic Medical Research Unit, recommended routine physical examinations, chest x-rays, and T.A.B. inoculations, which became standard practice in hiring Inuit and Qallunaat DEW Line employees.65

The DEW Line offered several incentives for Inuit to settle into permanent and semi-permanent communities near radar sites. The concentration of Inuit populations, in addition to the influx of southern workers, punctuated the need for improved health care facilities. For example, the RCMP personnel at Cambridge Bay frequently had Inuit patients in their charge, given that the settlement served as a gathering point for Inuit travelling to and from Charles

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63 It was recommended that regular inspections be conducted to ensure satisfactory sanitary standards at DEW Line sites by the medical officer responsible for the region and by a public health agency at the federal level, such as the Public Health Engineering Bureau. LAC, RG25, External Affairs, Series A-3-b, Volume 5926. File 50210-C-1-40, Access Code 32, Part 4.2, J.A. Hildes, “Report on Visit to DEW-Line Sites,” 7 April, 1955, 4.
64 All Northern Construction Company personnel were examined for discoverable illnesses. They were also screened for any social diseases, as the government believed that exposure to employees with social diseases could prove detrimental to exposed Inuit employees and any surrounding Inuit communities. LAC, RG85, Northern Affairs Program, Series D-1-A, Volume 2271, File A1009-11, Access Code 32, Part 1, A.J. Boxer, “Re – Eskimo health and Medical Facilities at Cambridge Bay with regard to DEW Line employees,” Memorandum for Chief of Arctic Division, 17 March, 1955.
Camsell Hospital in Edmonton. Recognizing the need for improved medical facilities, A.J. Boxer, the northern service officer in the Western Arctic, recommended to Ottawa that the federal government should be more attentive to the medical needs of the community. Given the importance of Cambridge Bay and the frequency of East-West travel, more Qallunaat and Inuit would be passing through or staying in the settlement. Therefore, Boxer recommended building a nursing station, or even a hospital, to meet the medical needs of the increase in human traffic and the growing local population. In this case the DEW Line pushed the government to establish new nursing stations that would help to address the health requirements of Inuit settlements.

**Constraints and Limitations**

The DNHW and the DNANR made conscious efforts to effect positive change in Northern health care. These efforts, however, were limited and constrained by several factors. First, a constant shortage in medical professionals willing to work in the North ultimately resulted in tensions between the FEC and the DNHW. Financial constraints also limited the government’s ability to build new medical facilities in the North. Additionally, despite their attempts to protect Inuit, Inuit men working on the DEW Line contracted illnesses. Even Inuit who lived in settlements far removed from DEW Line sites suffered from the spread of illness and disease, as the expansion of the administration and health services brought more contact between Qallunaat and Inuit communities. Environmental and geographic realities continued to challenge health care practitioners in their attempts to provide health services to the Inuit. Transportation and communication depended entirely on weather conditions, and geographic distance often isolated medical practitioners from their peers. Finally, government officials in

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Ottawa and medical practitioners in the North continued to struggle against cultural differences when attempting to improve Inuit health. Therefore, while the government committed to improving the health conditions of the Inuit and to increasing the accessibility of health services in the North, shortages in labour and finances, low immunity levels, environmental obstacles, and cultural differences limited and constrained their ability to implement effective policies and programs.

**Shortage of Human Resources**

Northern health care in the 1950s was characterized by a shortage of medical professionals and adequate medical facilities. While the construction of the DEW Line required the FEC to hire two doctors, one stationed at Frobisher Bay and one stationed in Coral Harbour, DEW Line doctors were responsible only for the health and welfare of DEW Line employees.67 Doctors working for the FEC did not work for the government and did not have official orders to care for non-DEW Line-employed Inuit.68 Thus, the government could not explicitly rely on DEW Line medical resources to improve the health status of the general Inuit population.

Despite concerted efforts from the DNANR and the DNHW to find qualified personnel to staff nursing stations, hospitals, and military sites, however, few medical professionals wished to work in the North; those who did often accepted short-term one or two year contracts.69 The

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67 This did not mean that the FEC did not cooperate with the government at all. For example DEW Line doctors often treated non-employed Inuit when asked on humanitarian grounds. This created tensions between the FEC and the government and will be discussed later in this chapter. LAC, RG24, National Defence, Accession 1984-84/049, Box 1126, File 700-80/9, Access Code 32, M. Bakst to The Department of the Air Force, 28 October, 1957.; Additionally, certain medical supplies could only be obtained with permission and help from the federal government. For example, morphine was not on the commercial market, but the Government had a stockpile of the drug. Given that constructing the DEW Line constituted a matter of national defence, the FEC requested that the government supply the DEW Line doctors with morphine. LAC, RG85, Northern Affairs Program, Series D-1-A, Volume 2271, File A1009-11, Access Code 32, Part 3, H. Graham Ross to Mr. B.G. Sivertz, 10 May, 1955.
69 The issue of building and staffing medical facilities in the North often required cooperation and communication between the DNANR and the DNHW. Thus, there is a lot of cross-departmental communication and both
government’s inability to recruit a sufficient number of medical personnel and build medical facilities left medical resources strained and created tension between the FEC and the government.

Government officials noticed the shortage of medical staff early in the construction process. Dentists were in particularly short supply. In 1955, the FEC requested that the government send a dentist to them, as they frequently had to fly their employees to Edmonton for dental care. The government attempted to meet the needs of the FEC, however, six months into the DEW Line project, the government had interviewed only one candidate who rejected the position. The only time the government succeeded in finding dentists for the DEW Line sites was when they agreed to sign thirty day contracts. By 1958, the need for a dentist had yet to be met. As the Canadian government had little luck in filling the position of DEW Line dentist, the FEC posted advertisements in the Toronto and Montreal newspapers, hired a recruiter in Edmonton, contacted the Canadian medical and dental association multiple times, contacted leading universities and colleges such as McGill and UBC for candidates, contacted the Chicago dental agency, and even attempted to capitalize on personal connections of DEW Line employees. Despite their best efforts, dentists willing to work in the North remained scarce.

Dr. P.E. Moore noted that the difficulty in obtaining dentists resulted from the fact that dentists were guaranteed long-term employment in the South and DEW Line work meant

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travelling under hazardous conditions and living in barracks.\textsuperscript{72} Unable to find a Canadian dentist for the position, the FEC resorted to recruiting American dentists.\textsuperscript{73} In 1959, the FEC offered to pay the DEW Line dentists $1 100 per month with variable terms of service. For example, while the FEC preferred to sign one year contracts, “any mutually satisfactory term of service [was] acceptable.” Additionally, because the dentists qualified as FEC employees, they received all of the company benefits, including pension rights, vacations, hospital and surgery benefits, and group insurance.\textsuperscript{74} Despite their best efforts to offer an appealing contract and find qualified dentists, the shortage of dentists continued throughout the entire 1950s..\textsuperscript{75} Therefore, the lack of human resources, not government efforts, limited the government’s ability to improve the delivery of health services in the North.

\textit{Shortage of Medical Facilities}

Prior to the construction of the DEW Line, the North lacked the necessary medical infrastructure to support the influx of migrant workers and Inuit who congregated around DEW Line sites, transportation hubs, and administrative centres. Cambridge Bay still did not have a

\textsuperscript{75} The government truly made an effort to meet the medical needs of the region. In 1955, when L.E.C. Davies, a senior officer working for Northern Health Services, visited six hospitals in the Mackenzie area, he noted that all six hospitals were understaffed and in great need of trained nurses and technicians. LAC, RG85, Northern Affairs Program, Series D-1-A, Volume 2272, File A1009-11, Access Code 32, Part 9, L.E.C. Davies, “Medical Inspection Northwest Territories and Western Arctic July and August 1955,” July and August 1955, 4.; The population of the region was fast outgrowing the hospitals and of the medical staffs’ ability to treat patients effectively and within a reasonable period of time. Aklavik’s population now numbered over 700 people, in addition to a transient population of approximately 100 people. With the expansion of Northern administration, government officials, missionaries, Hudson’s Bay Company employees, teachers, doctors, northern service officers, RCMP officers, and their families, the non-Inuit population alone numbered over 300. LAC, RG85, Northern Affairs Program, Series D-1-A, Volume 2272, File A1009-11, Access Code 32, Part 9, L.E.C. Davies, “The Mackenzie Delta,” July and August 1955, 1.; Dr. P.E. Moore thus suggested that two doctors be appointed to cover sites 1-24; one for sites 1-12 and another for sites 13-24. However, as with dentists, the number of doctors manning the DEW Line depended on the interest and supply. LAC, RG29, National Health and Welfare, Volume 2873, File 851-1-10, Access Code 32, Part 1, P.E. Moore to Mr. Ludwig, 25 April, 1956.
nursing station when DEW Line personnel arrived in 1955, even though 700 to 800 Inuit already lived in the surrounding area. The RCMP officers administered basic medical aid and, during an outbreak of measles, spent up to six hours a day performing medical duties instead of their routine RCMP duties. Tuktoyaktuk also needed a nursing station, as approximately 300 to 400 Inuit and twelve to forty Qallunaat lived in the area. The nearest hospital was in Aklavik, 100 miles away by air, and inaccessible during the ice break-up and freeze-up period. Furthermore, past experience proved that “everyone in the area would expect to use [the medical facility],” regardless of who built and operated it. The DNHW “could see an immediate need for medical facilities,” particularly “at Cambridge Bay where it would be possible to serve about 800 natives and at Fox, a centre for about 600.” The DNHW hoped that the FEC’s DEW Line medical facilities could meet the health care demands of the region, but were prepared to provide additional facilities if required.

In 1956, the DNHW planned to build a twenty-bed hospital at Frobisher Bay and to convert the existing nursing station into a nurses’ residence or transfer it to another government

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76 Miss Robinson, the welfare worker, attempted to combine the duties of Welfare Teacher and nurse by teaching, making home visits, office visits, and administering inoculations; however, she was due to leave the following year. LAC, RG85, Northern Affairs Program, Series D-1-A, Volume 2272, File A1009-11, Access Code 32, Part 9, L.E.C. Davies, “Medical Inspection Northwest Territories and Western Arctic July and August 1955,” July and August 1955, 3.

77 Freeze-up and break-up refer to the time in the fall and spring when the water in the rivers, lakes, and bays were in the process of freezing over or thawing, respectively. During this period of time, float planes could not land or take off, rending air travel in certain communities impossible. LAC, RG85, Northern Affairs Program, Series D-1-A, Volume 2272, File A1009-11, Access Code 32, Part 9, L.E.C. Davies, “Medical Inspection Northwest Territories and Western Arctic July and August 1955,” July and August 1955, 5.

78 Dr. Proctor, a doctor working for the Department of National Health and Welfare, acknowledged in November of 1955 that the existing medical facilities on the DEW Line were adequate for single employees, but did not provide for the dependents of native employees, let alone the Inuit who would congregate around the stations. LAC, RG85, Northern Affairs Program, Series D-1-A, Volume 2272, File A1009-11, Access Code 32, Part 9, C.J. Marshall, “Coordination of Northern Health Facilities,” Meeting Minutes, 16 November, 1955, 1.

79 In the event that the medical facilities did not suffice, the department felt that a nursing station at Cambridge Bay and one at the Fox station would suffice, as hospitals already existed at Aklavik and Churchill. Frobisher Bay was also in need of a hospital. There would be an estimated 350 servicemen and civilians and 300 Inuit in the area, not including the transient population. Dr. Proctor suggested that the department build a hospital on Baffin Island, as the hospital at Pangnirtung could not be expanded and remained inaccessible from many parts of the island. LAC, RG85, Northern Affairs Program, Series D-1-A, Volume 2272, File A1009-11, Access Code 32, Part 9, C.J. Marshall, “Coordination of Northern Health Facilities,” Meeting Minutes, 16 November, 1955, 1, 2-3.
department. The medical officer stationed at Pangnirtung would re-locate to the new hospital in Frobisher Bay. An additional ten bed nursing station was planned for Foxe station in the North-East region of Melville Peninsula. The DNHW proposed repurposing the RCMP building in Cambridge Bay as a temporary nursing station, until a fifteen bed nursing station could be built, and conceded to the possibility of hiring a medical officer for the settlement in the future. Finally, the department hoped to have a six to eight bed nursing station in Tuktoyaktuk by 1958. Therefore, the government demonstrated a clear understanding of the need for more medical facilities and a willingness to provide these facilities. Ultimately, however, the department failed to construct all of the planned facilities.

In his 1959 article, “Medical Observations and Problems in the Canadian Arctic,” Dr. Otto Schaefer, noted the lack of adequate Northern medical facilities. By 1959, only two doctors, one stationed at Chesterfield Inlet and the other at Pangnirtung, served the entire Western Arctic. There were only four mission hospitals and ten nursing stations across the entire Arctic, and the hospitals ranged in size and quality. The Anglican hospital in Aklavik had fewer than twenty beds, though it often housed more patients, and lacked running water and central

81 Dr. Otto Schaefer grew up in Nazi Germany, where he gained medical experience working in Sevastopol as a doctor’s assistant. He obtained his medical degree in 1944 and worked as an intern in surgery, obstetrics, and pediatrics for a year. He proceeded to earn his specialization in internal medicine in 1950 and became the head of the Department of Internal Medicine at Baden’s city hospital. In 1951, he immigrated to Canada, hoping to work as a physician for Indian Health Services. He had been fascinated by the Inuit and Canada’s Arctic ever since he was a child. Ultimately, Dr. Schaefer obtained his license to practice medicine in Canada, and worked at Charles Camseil Hospital from 1952-1953, before being transferred to Aklavik in 1953. He worked in Aklavik until 1955, when he moved to Pangnirtung, and finally to Whitehorse in 1957. Gerald W. Hankins, Sunrise Over Pangnirtung: The Story of Otto Schaefer, M.D. (Calgary: The Arctic Institute of North America of the University of Calgary, 2000), 7-15.; Dr. Schaefer dedicated his career to studying Inuit health issues, publishing over 100 works on the subject, and became the first Director of the Northern Medical Research Unit. Gerald W. Hankins, preface to Sunrise Over Pangnirtung: The Story of Otto Schaefer, M.D. by Gerald W. Hankins (Calgary: The Arctic Institute of North America of the University of Calgary, 2000), ix.
heating.\textsuperscript{83} By the end of the 1950s, the North still lacked an adequate number of facilities and some existing facilities still lacked modern equipment and basic utilities. The shortage of satisfactory facilities ultimately limited the department’s ability to substantially improve Inuit health.

\textit{FEC-Government Tensions}

During the planning phase of the DEW Line, the government and the FEC recognized that “natives would congregate, at least in the area of the main stations, whether their presence was wanted or not, and that there was, therefore, a responsibility to be considered by the interested departments in the provision of hospitals and nursing stations.”\textsuperscript{84} The government’s inability to provide a sufficient number of medical practitioners and medical accommodations to service the local Inuit population resulted in tension between the Canadian government and the FEC. Having accounted for the planning, transportation of material, and eventual construction of additional facilities, the government believed that a few years would be required before they were ready for use and occupation. As previously demonstrated, however, the planned hospitals and nursing stations had yet to become a reality by 1959 and the FEC increasingly strained their own medical resources to compensate for the government’s shortage of medical professionals and facilities.

In September 1957, Jameson Bond, the northern service officer stationed at Cambridge Bay, reported that the lack of a nurse strained the services of Dr. Watson, a DEW Line doctor, and caused “some unfavourable comment in the sector over the Department of Health and


Welfare’s inability to send in a replacement nurse.”\(^{85}\) DEW Line employees provided help to Inuit patients at the cost of their assigned duties. For example, when an Inuk in an outlying community became sick, they were brought to the nearest DEW Line station. In many instances, the first aid man or the station chief overreacted, as they usually did not have sufficient medical training to properly assess the patient. The first aid man or station chief often contacted Dr. Watson, who would then request that the patient be brought to Cambridge Bay for treatment.\(^{86}\)

News of the DEW Line’s medical facilities had spread, further complicating the situation, because an increasing number of Inuit families sought medical attention at the radar sites.

Admiral Cruzen, Vice President of the FEC, stated that Inuit from “far distant points” would appear at the site and “expect assistance on demand, assistance which is difficult to refuse ... and since the volume of work is more than their medical unit can handle, [Admiral Cruzen] requested that the matter be brought to the attention of the responsible authorities.”\(^{87}\) During epidemics, the FEC had to reorganize and redistribute their resources in order to compensate for inadequacies in the government health care system.

In the fall of 1957, an influenza epidemic struck Cambridge Bay. Initially, Dr. Watson managed to care for, and treat, the FEC personnel and some Inuit on his own; however, as the

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\(^{85}\) Bond additionally voiced concern over the fact that Americans were present in the area, giving the issue “added importance,” because “Canadian medical practice [was] on display to non-Canadian citizens in matters concerning indigenous people.” Unfortunately, Dr. Falconer, Medical Superintendent, had not received any applications for the position of nurse. Dr. Falconer believed that the lack of applications might have been a result of the fact that gossip in nursing circles alluded to the “very limited facilities” available. “In other words, it may not be considered a desirable posting.” LAC, RG24, National Defence, Accession 1984-84/049, Box 1126, File 700-80/9, Access Code 32, Jameson Bond, “Treatment of sick Eskimos in Cam Sector by the Federal Electric Corporation,” Memorandum, 27 September, 1957, 1-2.

\(^{86}\) The RCMP Commanding Officer frequently took on additional responsibilities in arranging for the transportation of the patients from other communities on DEW Line aircraft and also gave advice and assisted the Nursing Aides in their duties. LAC, RG24, National Defence, Accession 1984-84/049, Box 1126, File 700-80/9, Access Code 32, “Treatment of sick Eskimos in Cam Sector by the Federal Electric Corporation,” Extract from memorandum dated September 27, 1957, from Mr. Jameson Bond, northern Service Officer, Cambridge Bay, N.W.T., 27 September, 1957, 1-2.

epidemic progressed, the number of patients grew to unmanageable proportions. Consequently, the FEC transferred Dr. Becker from the Alaska to Cambridge Bay to assist Dr. Watson in containing the illness and treating the sick. In a letter to the Department of the Air Force M. Bakst, the Assistant Project manager for the DEW Line, stated that “what [the FEC and DEW Line doctors] had done to assist the Eskimos [fell] within humanitarian action.” Incidents such as these heightened tensions between the government and the FEC, as the corporation’s resources were frequently redirected towards serving Inuit not employed on the DEW Line. Bond stated that the present state of affairs threatened the presently “good relations” between the local FEC officers and Canadian government officials. By the end of 1957, the general dissatisfaction with the DNHW’s apparent inaction had been “expressed verbally by several people who, either on behalf of the Corporation or other Government Departments, […] had] to cope with sickness amongst Eskimos.” Ultimately, the successful expansion of health care in the North depended on the cooperation of the FEC and other government departments and the

88 LAC, RG24, National Defence, Accession 1984-84/049, Box 1126, File 700-80/9, Access Code 32, M. Bakst to The Department of the Air Force, 28 October, 1957, 1.; The use of FEC resources did not confine itself to merely Cambridge Bay. Nearly every station site had an accompanying camp of Inuit. One particular problem area was Paulatuk, 60 miles southeast of PIN MAIN. The station chief frequently had to either treat the ill Inuk himself, or arrange for the patients transportation to the nursing station. It could take days before a regular flight along the DEW Line, travelling in the desired direction, reached the station or before a nurse from the Nursing Station could arrive at the site. While a nursing station was being planned for PIN Sector, it would only have four beds and its planned completion date was 1961. The DYE Sector of the line had no nursing station at all and the Anglican Mission Hospital at Pangnirtung was situated across “rugged, mountainous terrain 80 miles to the south,” while Frobisher Bay General Hospital, and its two doctors, lay 250 miles away. LAC, RG24, National Defence, Accession 1984-84/049, Box 1126, File 700-80/9, Access Code 32, John S. Willis, “Medical Arrangements - D.E.W. Line,” Draft, circa. July 1957, 3-4.; The government could not afford to place a medical professional at every site, and yet the Inuit often expected to receive medical help at the nearest DEW Line station. The only nursing stations were in Tuktoyaktuk, Coppermine, Cambridge Bay, Fox, and Frobisher Bay. Doctors were stationed at Aklavik, Pangnirtung, and Chesterfield Inlet. LAC, RG29, National Health and Welfare, Volume 2873, File 851-1-10, Access Code 32, Part 1, P.E. Moore to Mr. G.Y. Loughead, “DEW Line, Medical Emergencies,” 22 November, 1957, 1-2.


limitations of the DNHW’s funds, facilities, and human resources jeopardized those relationships.

On 24 July 1961, the FEC met with the DNHW to discuss the issue of providing health care for non-FEC-employed Inuit. Admiral Cruzen reiterated that, although the FEC hired a first aid man and an Office Supervisor trained in “medical science” for each DEW Line site, these men were primarily hired to perform administrative and operational duties. The FEC expected that medical issues would only account for ten percent of their work and that they would treat minor ailments of FEC employees and dependents only; all serious cases were to be referred to the FEC professional medical and dental staff. As stipulated in the original agreement between the Canadian government and the FEC, the FEC medical professionals and facilities would only treat unemployed Inuit and non dependents in cases of emergency.\footnote{LAC, RG29, National Health and Welfare, Volume 2874, File 851-1-10, Access Code 32, Part 2, “Minutes of a meeting held between the Federal Electric Corporation and Departments of the Government of Canada on July 24, 1961 at 10:30 A.M. in the Conference Room – Northern Administration Branch Fifth Floor – Kent-Albert Building.” 3.} In practice, the FEC expended their resources more frequently than required.

Inuit still asked first aid men and sector Office Supervisors for help with recurring or routine medical needs, such as delivering babies and treating colds and other diseases. The high demand for their medical services resulted in overtime work and interfered with their ability to perform their primary duties. Furthermore, “the FEC was greatly concerned about a situation which was considered to be the responsibility of the Canadian Government particularly as it added to the Federal Electric’s operating costs and placed the firm under fire for alleged abuse of contract.”\footnote{Ibid., 3.} At the meeting on 24 July, however, Dr. Proctor admitted that the DNHW could only afford to send medical professionals to isolated locations. As a solution, the DNHW proposed placing male nurses at each end of the line. These nurses would then continuously travel along
the line, treating minor and routine ailments in the communities they visited, providing some form of relief to the doctor posted in Cambridge Bay, who would be responsible for treating serious cases. Ultimately, the DNHW lacked the human and financial resources required to adequately to relieve the FEC from providing extra medical responsibilities. Therefore, despite the DNHW’s efforts to take responsibility for Inuit health and welfare, the continued shortage of medical professionals willing to work in the North as well as financial constraints, limited the DNHW’s ability to provide adequate health care services to Inuit. Consequently, the tensions between the FEC and the government continued; however, the resultant tensions between the FEC and the government prove that Inuit took advantage of the DEW Line sites and the new medical facilities. In this way, the DEW Line did improve Inuit access to health services, although the change did not come intentionally and it did not account for the lack of services provided by the Canadian government.

**Spread of Disease**

The spread of disease and illness to Inuit communities continued to aggravate the efforts of the DNHW to improve the health of the Inuit and strained their resources. Donalda Copeland recalled that as soon as the supply ship sailed out of harbour “the inevitable aftermath that

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93 As an additional measure of precaution, the DNHW agreed to provide the NSOs with more extensive first aid training. LAC, RG29, National Health and Welfare, Volume 2874, File 851-1-10, Access Code 32, Part 2, “Minutes of a meeting held between the Federal Electric Corporation and Departments of the Government of Canada on July 24, 1961 at 10:30 A.M. in the Conference Room – Northern Administration Branch Fifth Floor – Kent-Albert Building,” 3.; The department discussed the benefits of having a female public health nurse travel the DEW Line as opposed to a male nurse. It was acknowledged that the female nurses were “superior to male nurses in Public health nursing, when primarily concerned with women and children.” The nature of the job, however, would require the nurse to stay overnight at satellite sites which ultimately “preclude[d] the employment of female nurses. There [was] no doubt [that] weather conditions and medical requirements [would] occasionally hold both the nurses and the travelling physician at the small sites which [had] limited accommodation and that [were] suitable only for males.” LAC, RG29, National Health and Welfare, Volume 2874, File 851-1-10, Access Code 32, Part 2, C.M. Bolger, “Medical Arrangements – DEW Line,” Memorandum for the Director, 27 October, 1961, 1-2.

94 While the FEC performed very little medical work in Cambridge Bay by December of 1961, the FEC still did a “great deal of medical work” in the Pin Sector. LAC, RG 85, Northern Affairs Program, Volume 2, Box 3, File A207-1, “Minutes of a Meeting held at Cambridge Bay on December 6th and 7th, 1961, to discuss Dew Line Operations,” circa. December 1961.
always seemed to follow contact with the outside world, began to ravage [Coral Harbour]. This time it was dysentery ... Within hours the germs found fertile ground in which to breed, and the scourge rapidly intensified to tremendous proportions.\(^9\) As had occurred with the polio outbreak in Chesterfield Inlet in 1949, the illness spread quickly. The outbreak of dysentery had reached Seahorse Point, 120 miles away, and had already killed two Inuit there, before Donalda had even gained control of the situation in Coral Harbour.\(^9\) Programs, such as the Eastern Arctic Patrol, meant to improve the health of Inuit, often created epidemics because they involved Qallunaat-Inuit contact. When Dorothy Knight served as a public health nurse in Lake Harbour from 1957-1958, she noted that “influenza began raging again not long after the departure of the C.D. Howe, and this time, there was also diarrhea.” An outbreak of pneumonia followed the influenza epidemic. Although influenza rarely killed Inuit by the late 1950s, it affected Inuit in other ways. For example, just as Inuit prepared to leave the settlement for their winter camps, illness struck, delaying the “September exodus.” While some Inuit families “had already begun packing their pots, pans, and bedding into boats,” their preparations ceased “as body temperatures soared.”\(^9\) Unfortunately, the routine visits of the C.D. Howe played an important role in administering health services. Dentists and doctors travelled on the ship through the Arctic to treat minor ailments and to find Inuit in need of serious medical treatment and the C.D. Howe occasionally transported patients who could not be treated in the North to the South for treatment in Southern sanatoria.\(^9\)

\(^9\) The common cold and influenza also commonly followed the docking of ships. Copeland et. al, Remember, Nurse, 142.
\(^9\) Copeland et. al, Remember, Nurse, 142.
\(^9\) Lee, Lutiapik, 97.
\(^9\) The transmission of illness from Qallunaat visitors to Inuit communities is well documented. In a 1958 article published in the Canadian Medical Association Journal, entitled “An Immunological Study of the Canadian Eskimo,” L. Greenberg, J.D. Blake, and M. Frances Gorman observed that there were “instances on record of an entire community developing upper respiratory infection within a few days of the arrival of the annual supply ship – this in spite of the fact that up to that point no person, either on board or on shore, had been clinically ill.” Greenberg
Environmental Obstacles

In addition to the lack of human and financial resources, and the persistence of epidemics in Inuit communities, environmental obstacles hindered government efforts to expand and improve health care in the North. In total, the Canadian Arctic boasts 1,000,000 square miles of land and is divided into three regions: Western, Eastern, and Northern Arctic. In the late 1940s, Dr. Moody served as the sole doctor for the entire Eastern Arctic which included the districts of Keewatin and Franklin, Northern Quebec, and a strip of Labrador and the Arctic Islands, including Baffin Island.\(^9^9\) Approximately 2,000 Inuit lived in the Eastern Arctic.\(^1^0^0\) The difficulty of travelling in the Arctic and providing health care to large but scattered populations became a defining experience for many Northern health care practitioners. Even after the completion of the DEW Line, their ability to travel to settlements and transport patients depended heavily on weather conditions. The natural geography of the region hindered communication efforts and isolated health care practitioners from the support of their colleagues. The unique challenges of the Northern landscape regularly forced health care practitioners to improvise in their practices.

*Travel and Transportation*

Northern health care practitioners utilized various forms of transportation in their Arctic travels, but were always subject to the Arctic climate. In the early 1950s, poor weather conditions constrained Donalda Copeland’s activities in Coral Harbour. Snow storms forced her...

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\(^1^0^0\) Moody, *Medicine Man to the Inuit*, 5.
to delay visits to nearby camps and even neighbours in her settlement. She vividly described the ferocity of one particular Arctic storm in her memoir:

We were completely cut off, not only from the rest of the island, but from the camp and the post nearby. Even an Eskimo would not venture out in such a blizzard. When such a storm blows up, we were told, even with his uncanny sense of direction a wise Eskimo on the trail always stops and builds an igloo in which to shelter until it has passed…For three days the storm raged. Then, with the force of the wind seemingly all spent, it ceased as abruptly as it had started.101

Severe weather conditions could even impede modern methods of transportation. Dr. Howerd's first Inuit patient was an Inuit woman, in her third month of pregnancy, having a miscarriage during a snow storm.102 When the patient’s condition had sufficiently improved in the morning, he decided to move her to the nursing station at Frobisher Bay. The storm had subsided and the traffic superintendent said that the roads had been ploughed. Given the favourable conditions, Dr. Howerd attempted to transport the patient in the comfort of the company’s truck. During the drive to Frobisher Bay the truck got stuck in a snow drift and neither Dr. Moody nor the driver could shovel the vehicle free. The driver returned to the base to retrieve a snow plough, which ploughed the vehicle out of the drift.103 The completion of the DEW Line did not make Arctic travel easier, or more convenient.

Dorothy Knight, the Lake Harbour public health nurse from 1957-1958, struggled to cope with travelling in the northern climate. For example, Pootoogook, an Inuk from an outlying camp, arrived at Lake Harbour to report that his wife had fallen severely ill after delivering a

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101 Copeland et. al, Remember, Nurse, 103.
102 This incident further demonstrates the shortage of medical resources in the North. At the time, the roads were blocked due to the snow storm and there were no stretchers. Dr. Moody wrapped her in parkas and carried her on a thin mattress to the hospital bed. This type of creative improvisation is a common theme in the memoirs of medical practitioners who practiced in the North. Howerd, DEW Line Doctor, 67.
103 Howerd, DEW Line Doctor, 68-69. In some instances, Dr. Howerd had an easier time transporting his patients than most northern nurses. Baffin Base acted as the staging post for aircraft flying from the South to all parts of the Eastern Arctic. Thus, there “was never a long wait before a flight was arranged for [him].” He could easily request a mercy flight in cases of emergency and, given favourable weather conditions, he “could be on [his] way to the site within an hour of receiving the call.” He additionally had the advantage of being able to hitch hike rides on airplanes to pay routine visits to other sites and communities. Many northern nurses did not have the luxury of being able to readily access and use such resources. Howerd, DEW Line Doctor, 83.
Unfortunately, a raging storm prevented Dorothy from travelling to the camp and Pootoogook’s wife succumbed to the illness. Arctic travel proved difficult even in ideal weather conditions. Dorothy discovered that travelling by *komatik* (dog sled), the only practical and available form of transportation, “[took] all of her mental and physical resources.” Dorothy had to jog alongside the sled, because if she sat on the sled for too long she could literally freeze to death. Thus, her trips often involved a significant amount of hopping on and off of the *komatik*.

Dr. Otto Schaefer often had to wait days or weeks to travel to communities or to transport his patients, because of bad weather, engine trouble, or other hazards associated with travelling by aircraft, boat, or dog-team. The DEW Line did not significantly improve Dorothy or Dr. Schaeffer’s ability to traverse the Arctic landscape. In most instances, government health facilities were located too far away from military bases and transportation hubs to take full advantage of improved transportation technology and services. Even in situations where modern transportation was available, weather and climate impeded Arctic travel.

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104 Dorothy later surmised that the woman suffered from puerperal sepsis. Lee, *Lutiapik*, 119.
106 Dorothy attempted to visit Kooyoo’s camp outside of Lake Harbour. She managed to reach Seemeegak’s camp, a couple sleeps away from Lake Harbour, before turning around and going back to Lake Harbour. Dorothy acknowledged that she did not have the mental or physical stamina to travel the distance to Kooyoo’s camp. This scenario, however, occurred earlier in her career in the North, before she was truly able to adjust to Arctic travel. Her endurance increased over time. Lee, *Lutiapik*, 180.
107 The Inuit were not immune to the weather and harsh travel conditions. Dr. Schaefer described a situation in which a man, over the age of 50, received a fracture during a fishing trip in the mountain lakes. The accident occurred during the late freeze-up period, when there was very little snow in the hills and a significant amount of open sea-water. Thus, the fishing group was forced to take a wide detour over “indescribably rough, rocky terrain with the patient lashed for six days and nights to the sled in 20°F below zero weather. When I saw his badly displaced fragments, I wondered how he had survived his agonizing journey.” In another instance, Dr. Schaefer described the experience of an Inuit family that arrived in Pangnirtung with an 18-month old infant suffering from meningitis. The family had travelled for a week from Hoare Bay “across the snowfields, glaciers and, at that time of the year, a barren tundra and rocky gorges of Cumberland Peninsula and over the breaking ice of Kingnait fjord, where they had sent one anxious day and night on a drifting icefloe.” Otto Schaefer, “Medical Observations and Problems in the Canadian Arctic,” In *Canadian Medical Association Journal* 81, (August 1959): 249.
108 At the time of Dorothy’s arrival in the North, the RCMP had a few Otters, the Hudson’s Bay Company had some Beavers, and there were smaller aircraft which transported geologists, archaeologists, and other private individuals to the North; however, there were few military aircraft in the area at her disposal and the DEW Line was too far
Communication

Arctic weather and geography also interfered with the functionality of Northern communication systems. For example, Dr. Moody noted that “static, weather conditions, insufficient transmitter power, and the inaccessibility of the area itself” contributed to failures in radio communication.\(^{109}\) The aurora borealis and sun spots interfered with the transmission of radio signals,\(^{110}\) while the geographic location of a settlement could block signals entirely. Dr. Moody’s radio was so unreliable that he often used the “telegram, writing out long descriptions of methods, drugs and even of the containers in which they could be found.”\(^{111}\) Dorothy discovered that the high mountains surrounding Lake Harbour stifled the signal, making radio communication inconsistent and unreliable at best.\(^{112}\)

In his memoir, Dr. Howerd described a period in which “renewed storms brought a ‘white-out’” and flying and communication between Baffin Base and other DEW Line sites became impossible.\(^{113}\) Consequently, Dr. Howerd treated patients over teletype, providing instructions on how to treat the patient to other officials, such as RCMP officers and the station chief. He “never knew when the system was going to break down because of mechanical failure north of her nursing station to be of use. Additionally, Lake Harbour did not have an airfield. Lake Harbour could only accommodate helicopters, as they had a helicopter pad near the HBC store, and float planes when the bay froze or thawed nearly completely. Lee, Lutiapik, 39.


\(^{110}\) Lee, Lutiapik, 28.; According to Dr. Moody, the radio became a more common mode of communication in the 1940s: “An earlier doctor had received a few telegrams asking advice. When weather or distance kept him from organizing a patrol and seeing the patient himself, he used to give instructions by wire. That was how it started. Dr. Rawson had elaborated on the practice. It was not considered a common thing to send a telegram to the medical officer hundreds of miles away, asking, for example, whether it was serious that junior kept vomiting blood and would the doctor please say what should be done.” Moody, *Medicine Man to the Inuit*, 26-27.

\(^{111}\) Dr. Moody treated his first case over telegram. A fifteen month old baby had contracted meningitis. When he had been notified, the baby boy had a high fever, stiffness in its shoulders and neck, and his spine seemed to be curving. The baby’s father was Chelsey Russel, the manager of the HBC post in Eskimo Point. Because he could not physically travel there to administer the proper treatment in time, Dr. Moody had to instruct Mr. Russel on the method of treatment over the telegram. Mr. Russel had to inject a hypodermic solution into the boy’s fontanel, through the top of the boy’s skull. The treatment was successful; however, this example illustrates the complications involved in providing health care over vast distances. Moody, *Medicine Man to the Inuit*, 28-33.

\(^{112}\) Lee, Lutiapik, 28.

\(^{113}\) Howerd, *DEW Line Doctor*, 51.
or weather conditions.”\textsuperscript{114} There were times “when the only way of communicating with a site was by asking the pilot of a plane flying in the vicinity to relay a message to the site and then to pass back the reply.”\textsuperscript{115} In short, Arctic weather and geography limited Northern communications, just as it limited travel and transportation.

\textit{Isolation of Practitioners}

Unreliable communication reinforced feelings of isolation amongst health care practitioners. Dr. Moody had nightmares when he realized that he not only had to diagnose illnesses and prescribe appropriate treatments over long-distance communication, but that he could not draw upon the opinion and expertise of other medical professionals. In Southern hospitals, doctors had the option of consulting a specialist in difficult cases. Poor communication systems, combined with pressing time limits, forced Dr. Moody to rely primarily on his own judgment.\textsuperscript{116} Northern nurses experienced similar feelings of isolation and pressure.

Within minutes of stepping off the \textit{C.D. Howe} and into the settlement of Lake Harbour, Dorothy Knight faced her first emergency case. A little girl had fallen severely ill and needed immediate medical treatment. The local school teacher, Marg, asked Dorothy what she thought of the girl’s condition, and Dorothy hesitated to provide an answer. It was illegal for nurses to provide diagnoses. Dorothy ultimately determined that the girl had meningitis, but continued to doubt her own professional decisions and experience. She acknowledged that she had certainly observed rare diseases and conditions during her time at the Detroit Children’s Hospital, but “could she really diagnose and treat a case on her own? ... There had always been a doctor

\textsuperscript{114} Howerd, \textit{DEW Line Doctor}, 51.
\textsuperscript{115} Dr. Howerd stated that it “all seemed alarmingly primitive to me at first, but it is surprising how efficiently it worked.” Howerd, \textit{DEW Line Doctor}, 51. Although this may have been true of his experience, the same cannot be generalized to the doctors and nurses who served in communities that were not transportation and communication hubs. For example, Dorothy Knight would not have been able to communicate effectively through this method, as ships and planes rarely stopped in Lake Harbour throughout the year.
\textsuperscript{116} Moody, \textit{Medicine Man to the Inuit}, 27.
around to decide what to do.” Dorothy Knight became “sickly aware that the responsibility and aloneness would continue for a year.” The construction of the DEW Line did little to alleviate feelings of isolation.

**Cultural Challenges**

In addition to the challenges presented by the environmental conditions of the North, the government and medical professionals struggled to reconcile cultural differences between Southern Canadian practices and expectations, and Inuit cultural and social norms. The government created legislation to improve the health and welfare of recovering Inuit patients, but Inuit social practices hindered the effectiveness of the programs. Most significantly, despite the introduction of modern Western medicine, Inuit continued to rely on traditional Inuit healing practices. The persistence of traditional Inuit practices, and the interaction between Southern expectations and Inuit cultural practices, created a complex and dynamic relationship between the government, medical practitioners, and Inuit patients.

**Social Practices**

The DNHW and DNANR struggled to reconcile their intentions with the execution of their policy, as Inuit social practices often diminished, in their eyes, the effectiveness of their recovery programs. For example, when proper medical treatment could not be provided in the North, the department evacuated Inuit patients to Southern sanatoria for treatment. F.J.G. Cunningham, Director of the Department of Northern Affairs and National Resources, noted that evacuated Inuit patients did not have any difficulties re-adjusting to Inuit life upon their return and often exhibited great joy and happiness at being home. The issue, however, was the

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117 Lee, Lutiapik, 45-47.
118 The most common cases of evacuation resulted from tuberculosis as the government and medical officials attempted to eradicate the disease in the North. By evacuating the infected, officials hoped to prevent patients from further contaminating their families as the Inuit often lived in tight and confined spaces with poor ventilation.
inadequate nourishment of patients after they returned to the Arctic. To address the issue of
malnourishment, the government provided each patient with regulated food rations. Cunningham
felt that the rations were the “only present solution,” but did not find them to be “totally
satisfactory.” Recovering Inuit patients did not use the rations as the government intended.
Instead, they shared “their good food with family and friends, and failed to receive the full
nutritional benefit of the rations.” Cunningham suggested cooking and serving meals at a special
kitchen open to just approved patients as an alternative, but recognized that “these things [were]
just not practical at [the] time.” 119 The government did not fully understand that, by sharing their
rations, Inuit patients were upholding their traditional social practices and values. The
government’s systematic approach failed to address cultural differences and ultimately proved
ineffective.

Ataguttaaluk’s story explains the importance of sharing among Inuit. One year,
Ataguttaaluk, her husband, and their two children went hunting for caribou but could not find
any. They starved and grew weak; their dogs soon died. In order to survive, the family resorted
to eating their dogs but this practice could not sustain them. After their children died,
Ataguttaaluk’s husband told her that he would “die soon too…. Husbands are made to live
longer, so you must live to tell other people what has happened. Live with human flesh as long as
you can. Make sure you live!” 120 Ataguttaaluk survived by eating her children and husband.
Finally, Palluq and his wife happened upon Ataguttaaluk and rescued her. When she recovered,
remarried, and had a second set of children, she started

120 The story of Ataguttaaluk predates the 1950s, however, it continued to influence the ideologies and value system
of Apphia, who would have been a young adult in her twenties in the 1950s. Nancy Wachowich in collaboration
with Apphia Agalakti Awa, Rhoda Kaukjak Katsak, and Sandra Pikujak Katsak, Saqiyuq: Stories from the Lives of
Three Inuit Women (Kingston: McGill-Queen’s University Press, 1999), 69.
taking charge of telling people where the meat should go ... If people were hungry, if they
didn’t have any food, she would split her food with those people and make sure that they
had some of whatever she had ... She didn’t want anybody to be poor. If she had not eaten
human flesh, she would not have lived, so she didn’t want anybody ever to be hungry. If
she heard that someone from another camp was poor or hungry, she would tell people to
go and bring them meat ... She didn’t want anybody to ever be hungry and she made sure
that everybody got the food they needed. That is how she became a leader. She would tell
all the people to share, to never let anyone go hungry. Being hungry, it is not a good way
to be. People should not be hungry.\textsuperscript{121}

Survival in the Arctic, even during the 1950s, depended upon community cooperation and the
sharing of resources. Because the social practice of sharing resources was rooted in Inuit
experiences of survival and death, the government could not easily implement individualistic
policies, despite their best intentions and efforts.

\textit{Traditional Inuit Healing Practices}

While the DNHW and the DNANR struggled to create effective health policies and
programs, medical professionals constantly negotiated and renegotiated their place within pre-
existing Inuit health systems. The individual experiences and interactions with Inuit patients,
Inuit healers, and medical practitioners varied. Some practitioners, such as Donalda Copeland,
clashed frequently with Inuit healers and viewed Inuit healers and practices as the antithesis of
modern medicine. Others, like Dorothy Knight and Dr. Otto Schaefer, appreciated Inuit
knowledge and cultural practices and attempted to meet the needs of the pre-existing system,
without belittling Inuit healers and their treatments. Despite the introduction of Western modern
medicine, some Inuit continued to rely on traditional Inuit healers and traditional medicine.

Donalda Copeland’s disdain for Inuit healers is explained by the numerous, negative
interactions she experienced. She frequently dealt with the consequences of poorly executed
treatments. Tatweena, a local Inuk, had a swollen arm which, Donalda suspected, was caused by

\textsuperscript{121} Wachowich et. al, \textit{Saqiyuq}, 69-71.
a tubercular bone infection. She convinced Tatweena to travel to the South at the next opportunity to receive treatment. The next day, Tatweena reappeared at her office in worse condition. The swollen area had been “gashed with a jagged instrument,” leaving “three gaping holes, each oozing a thick purulent discharge.” Tatweena wanted to avoid evacuation and admitted that he had gone to see Harry, a self-proclaimed Inuit healer, after seeing Donalda. Harry tried to relieve the swelling by cutting Tatweena’s elbow and arm. Donalda immediately “began the routine of temporary treatment to save the lad’s life. This involved cleaning the wounds, soaking them with hot compresses, applying sulfa ointment and administering doses of penicillin.”122 Harry contributed to Donalda’s negative perception of Inuit healers and her belief in the inferiority of traditional medicine.123

Donalda did possess some understanding of Inuit healing practices. For example, she understood that Inuit opened wounds in order to allow “evil spirits” to escape; however, Donalda did not fully comprehend the complexity and spiritual significance of shamans, Inuit healing practices, or death rituals. Shimout, the local shaman, fascinated Donalda with his “swarthy face,” “streaked with rusty-coloured chalk or paint,” and strange rituals.124 When John Ell, the community leader, lay dying on his death bed, Shimout opened all of the windows. Donalda shut

122 Copeland et. al, Remember, Nurse, 228-229.
123 In another incident, Harry attempted to help Ennujuarak, a new mother, who could not produce milk for her newborn baby. Ennujuarak went to Harry, who told her to take hot knitting needles and make a hole through her nipples to allow the milk to flow out. By the time Ennujuarak requested help from Donalda, the wounds were swollen and infected. Donalda cleansed the wounds, drained them, and gave her morphine and penicillin. Without her help and treatment, Donalda felt certain that “the youngster would not have survived.” Donalda also made a distinction between her expectations of Harry and her expectations of Shimout. Shimout was a shaman: “He, as a medicine man, was only doing what he and many of his people considered to be his duty in the driving out of evil spirits. Harry, I felt, should certainly know better. In spite of all his apparently learned talk, it was evident to me that he, like his long-time enemy Tommy, had no understanding of the nature of germs.” Copeland et. al, Remember, Nurse, 230-231.
124 Donalda described his Shimout’s healing ritual as an outsider, not understanding the significance of each action: “Beads of perspiration trickled down from his brow, about which his coarse black hair flopped wildly. His dark crossed eyes added to his uncanny appearance. He writhed and twisted rapidly in some sort of dance, and on his face was a trancelike expression. His wild contortions were accompanied by a series of mutterings in a strange tongue.” Copeland et. al, Remember, Nurse, 143-144, 232.
a window, fearing that the cold air would hasten the man’s death, not realizing that the windows had been opened, and had to remain open, for John’s spirit to depart in peace.\(^{125}\)

In contrast to Donalda, Dorothy Knight experienced mostly positive interactions with Inuit healers, resulting in her respect for Inuit traditional medical practices. While travelling to Lake Harbour on the \textit{C.D. Howe}, Dorothy witnessed a mother react nearly immediately to her baby’s need to urinate. The mother retrieved a pot and allowed the baby to urinate in the pot, keeping her parka dry. Dorothy decided that “native women knew what she learned during her paediatric nursing experience in Detroit – that infants react with a small, started spasm whenever they are about to evacuate or urinate.”\(^{126}\)

Even in important matters, such as childbirth, Dorothy deferred to Oola and Pitsulala, two well respected and experienced Inuit midwives. While issues of faulty hygiene concerned Dorothy, she “felt it was wise to leave the Inuit to deal with childbirth as they had always done.” At most, she observed the birthing process, trusting Inuit midwives to deliver babies safely.\(^{127}\)

Despite the introduction of Western modern medicine, Inuit healers and traditional healing practices continued to flourish in many Inuit communities.

\(^{125}\) Copeland et. al, \textit{Remember, Nurse}, 232.

\(^{126}\) Part of Dorothy’s confidence in the Inuit may have stemmed from her own lack of preparation for her post. She observed the processes occurring on the \textit{C.D. Howe} as other nurses prepared the Inuit for their medical examinations every time the ship docked at a community: “Dorothy stood behind the nurse, listening curiously to questions and answers and realizing how much more public health training she could have used in her general nursing course. These were some of the things she should be aware of in her new job. How often did the Eskimo wash himself? What sicknesses had there been in the camp during the past year? Was the mother giving her children cod liver oil and vitamin supplements? Were there any new babies needing to be immunized against diphtheria, whooping cough and tetanus? Was there any infant in the family who did not have the scar from a BCG – Bacillus Calmette-Guerin – anti-TB vaccination?” Dorothy felt unsure of her role and capabilities as a public health nurse. The confidence of the Inuit in handling issues may have instilled her confidence in them. Lee, \textit{Lutiapik}, 30-31

\(^{127}\) “\textit{The most sensible way of handling the kind of ignorance you've brought to the Arctic, Dorothy, she told herself firmly, is to impose it on others as little as possible.}” Lee, \textit{Lutiapik}, 101-103.
Adaptive Policies

Although the Northern environment and traditional Inuit practices impeded the expansion of health care in the Arctic, the government and medical practitioners adapted policies, programs, and practices to meet the unique needs of local populations. In order to address the issue of disease and epidemics, doctors and nurses began quarantining infected villages -- an effective method of containing illness. The DNHW created the Eskimo Medicine Chest program and proposed the introduction of a Family Medicine Pack program to increase the accessibility of initial care and treatment. In addition to guiding the creation of new policies and programs, Northern doctors and nurses made adaptations at the local and individual level. Many health care professionals assumed extra duties and responsibilities and relied on community cooperation to provide quality health care.

Quarantines

Epidemics demonstrated the ease and speed with which disease spread among Inuit communities. Medical professionals discovered that limiting the movement of infected individuals stopped further spread of disease. Thus, doctors and nurses issued quarantines to infected Inuit camps, villages, and even military sites like the DEW Line. In Frobisher Bay, on 16 May 1955 Dr. Black diagnosed a sick Inuk with measles.128 R.D. Van Norman, the Northern Service Officer for the Eastern Arctic, contained the outbreak by quarantining all local Inuit. He additionally requested that the Foundation Company of Canada (FCC) quarantine of all its Inuit employees as well.129 W.H. Stuart, the General Superintendent of the FCC in Frobisher Bay, 

129 Van Norman also asked the FCC to consider dropping the Inuit employees from the pay roll for the duration of the outbreak, but to re-hire them at the end of the quarantine. LAC, RG85, Northern Affairs Program, Series D-1-A, Volume 2271, File A1009-11, Access Code 32, Part 3, R.D. Van Norman to Mr. Stuart, 18 May, 1955. A subsequent investigation of the outbreak revealed that, at the end of April, a United States Air Force (USAF) airman,
agreed to remove all Inuit in their service until the outbreak subsided. Additionally, the Canadian government sent Gamma Globulin to the North to vaccinate the Inuit against measles, giving priority to children and adults who had never had the illness. In total, fifty-one children and five adults received the vaccination. Officials managed to contain the epidemic by 31 May and lifted the quarantine.

By immediately placing the affected area under quarantine at the first sign of a possible outbreak, doctors contained the illness and prevented its spread to neighbouring Inuit settlements. Additionally, the early detection of measles, the identification of high-risk individuals, and the rapid distribution of vaccinations contributed to the swift containment of the outbreak. The proven successes of quarantine lead to its widespread use by medical professionals and government officials in potential epidemic situations.

The Eskimo Medicine Chest and the Family Medicine Pack

Medical practitioners played a more direct role in creating the Eskimo Medicine Chest program. In many cases, the delay between the start of the patient’s ailment and medical treatment resulted in their significantly worsened condition. For example, Seemeega, an Inuk from an outlying camp, appeared at Dorothy’s nursing station with his dead son. After a hunting trip, the boy contracted a high fever, a cough, and complained of aches and pains. The boy rested in bed for a few days until his condition worsened. Seemeega strapped his son onto his komatik and travelled to Lake Harbour to seek help from Dorothy; the boy died during the trip.


131 The effort to contain the measles outbreak benefitted from the combined efforts of Dr. D.K. Black from the FCC, Dr. J.A. O’Toole from the USAF, and Dr. R. Spangler from the US Army Engineers. They reportedly “gave freely of their time and through their effort succeeded in preventing the measles reaching epidemic proportions.” LAC, RG85, Northern Affairs Program, Series D-1-A, Volume 1120, File 1000/169, Access Code 31, Part 4, Constable R.S. Pilot, “Re: Cases of Measles – Frobisher Bay Area,” 7 June, 1955, 2.
Having finished his account of the events, Seemeega concluded his telling with “Ayonamut.” The phrase enraged Dorothy, who could not accept the Inuit philosophy. She grieved for the young boy, believing that he had only needed some antibiotics \(^{132}\) immediately to prevent his condition from worsening while he travelled to the nursing station. Seemeega’s loss was not unique. 

Constable R.S. Pilot, an RCMP officer stationed in Pond Inlet, reported eleven deaths between January and December 1959; seven of the eleven deaths were children under the age of one. Constable Pilot wrote to the DNHW, stating that “perhaps some of these deaths might have been prevented had the parents been able to administer a temporary treatment pending our arrival.” \(^{133}\)

The DNHW created the Eskimo Medicine Chest (EMC) program in order to prevent these types of scenarios from re-occurring. Officials suggested that the EMC carry basic medical supplies and medications to temporarily treat injuries and illnesses, until further medical help could be obtained. Ideally, an EMC would be placed in each Inuit camp, making it immediately accessible. \(^{134}\) The experiences of health care practitioners in the North had proven the need for such a program. Following its implementation, the department considered additionally creating the Family Medicine Pack (FMP) program although they rejected it.

Both programs had the same objective: to provide Inuit with a method of administering initial care until further medical help could be obtained. The key difference was that the EMCs were placed in settlements and given to trusted individuals; the FMP would have been distributed to individual families. \(^{135}\) While medical practitioners expressed the need for more accessible

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\(^{132}\) Lee, Lutiapik, 154-55.  
primary treatment, their experiences also cautioned them against leaving medication in the
possession of uninformed individuals. Akarolik, a Lake Harbour Inuk, suffered from
conjunctivitis. Dorothy prescribed auremycin capsules, but struggled to explain when the
capsules should be taken. Given the language barrier, Dorothy could only mime instructions to
Akarolik: she placed a capsule in front of Akarolik and pointed at the six on his watch, then gave
him another capsule and pointed at the twelve on his watch to indicate that he should consume
one pill every six hours. Akarolik misunderstood, however, and reappeared the next day
requesting more capsules. Through pantomime, he explained that he had broken the capsule,
poured the contents into his afflicted eye, spun in a counter clockwise circle, and repeated the
process with the remaining pills.\footnote{136}

Although this specific incident resulted in little harm, other misunderstandings ended
tragically. In Coral Harbour, Donalda Copeland belatedly learned of the death of a child in
Snafu, a nearby settlement. The child had fallen ill and Harry prescribed codeine without
consulting Donalda. The child took the codeine and died soon after.\footnote{137} Incidents such as these
emphasized the importance of leaving medication in the care of responsible individuals who
understood when and how each remedy should be used. Thus, the DNHW rejected the FMP
program, with the experiences of Northern health care professionals playing a significant role in
the DNHW’s policy decisions.

\footnote{Lee, \textit{Lutiapik}, 191-192.}
\footnote{Copeland and Myles, \textit{Remember, Nurse}, 231.}
Local Adaptations

Northern doctors and nurses experienced the difficulties of providing health services first hand. Many medical professionals redefined their roles in their communities by assuming additional duties and responsibilities to compensate for the shortage in human resources. Furthermore, in many instances, the successful delivery of health care depended on community cooperation and participation. These local adaptations contributed to the successful delivery of health services in the North.

Practitioners Playing Multiple Roles

Many doctors and nurses who worked in the North took on additional responsibilities during their time in service. For example, Donalda Copeland taught music, artwork, hygiene, and needlework at the Coral Harbour school, in addition to working as the community’s public health nurse.\textsuperscript{138} Dr. Howerd, like many of his fellow DEW Line doctors, went above and beyond his job description. The FEC had hired him to care for company employees and their dependents only; however, Dr. Howerd often treated Inuit patients who were not employed by the FEC. Although non-FEC-employed Inuit fell under the responsibility of the DNANR, Dr. Howerd understood that the nearest government doctor was stationed hundreds of miles away. It was more convenient for Inuit patients to “call in the DEW Line doctor than to bring the Department one all that way.”\textsuperscript{139} Thus, Dr. Howerd continued administering health services to all Inuit indiscriminately.

Dorothy Knight’s experience in Lake Harbour challenged everything she had learned in nursing school. First and foremost, Dorothy frequently diagnosed her patients’ illnesses and prescribed their treatment. Although Canadian law prohibited nurses from diagnosing patients,

\textsuperscript{138} Copeland and Myles, \textit{Remember, Nurse}, 6.
\textsuperscript{139} Howerd, \textit{DEW Line Doctor}, 48.
Dorothy had little choice. Receiving help from a doctor, unless one happened to be visiting the settlement, proved nearly impossible because of the poor radio signal. Out of necessity and practicality, Dorothy assumed the role of doctor.\textsuperscript{140} Furthermore, due to the lack of dentists in the North, Dorothy, like other northern nurses and doctors, served as the local dentist. Upon visiting camps, she personally treated cases of impetigo and boils, despite having little experience with such issues.\textsuperscript{141} Northern nurses and doctors had to assume additional responsibilities in order to meet the health needs of their Inuit communities. Whether they did so of their own volition, or whether their actions were mandated by the IHS, the health care practitioners attempted to compensate for the shortage of medical resources in the north.

\textit{Community Cooperation}

The shortage of medical staff in the North necessitated community cooperation. In settlements without a medical professional, individual community members took it upon themselves to ensure that health services were provided. For example, in Tuktoyaktuk, Ms. Robinson, the public school teacher, acted in the capacity of an ad hoc nurse. She averaged six to ten medical office visits daily, and made home visits fifteen to twenty times a month. She administered all necessary vaccinations for T.A.B.T., diphtheria, and whooping cough, and still maintained her position as the public school teacher.\textsuperscript{142} The level of community cooperation is especially evident in medical memoirs. RCMP officers, Hudson’s Bay Company employees, and Inuit themselves frequently supported the efforts of medical professionals in their communities, and contributed to the expansion and success of northern health care.

\textsuperscript{140}Lee, \textit{Lutiapik}, 45.
\textsuperscript{141}Lee, \textit{Lutiapik}, 139-141.
\textsuperscript{142}LAC, RG85, Northern Affairs Program, Series D-1-A, Volume 2272, File A1009-11, Access Code 32, Part 9, L.E.C. Davies, “The Western Arctic,” July and August 1955, 5.: While it was less common for teachers to fill in the role of health care provider, the example of Ms. Robinson demonstrates how non-medical professionals aided in the expansion of health care in the North.
As a DEW Line doctor, Dr. Howerd worked mostly from his post at Baffin Base. He commended Baffin RCMP officers, Corporal Newall, Constable Tony Jones, Constable George Heron, and Constable Laurie Morrice for their role in administering justice, issuing fur export permits, enforcing the alcohol ban, and dealing with minor crimes. “The most important aspect of their work,” Dr. Howerd wrote, “was among the Eskimos. They helped to watch the health and welfare of the settlements in the district and of the new community being built up at Frobisher Bay.” The RCMP constables conducted their own Eastern Arctic Patrol, travelling to Inuit settlements along the coast of Baffin Island, monitoring the health of local inhabitants. At times, RCMP officials helped directly in the administration of health care. For example, in Lake Harbour, Silasee had nearly removed the tip of his finger in an accident. Dorothy felt that it could be stitched back on, but she needed an additional person to administer the anesthetic as she worked. She recruited Terry Jenkins, one of two local RCMP officers, to help. Although Terry fainted promptly after the procedure, Dorothy and Terry saved Silasee’s finger. Dorothy could not have reattached Silasee’s finger without Terry’s help. Local employees of the Hudson’s Bay Company also assisted health care practitioners. HBC employees often facilitated communications between settlements in cases of emergency. For example, following the influenza outbreak at Lake Harbour, one Inuit woman developed cyanosis. Dorothy knew her patient would require large doses of antibiotics. Although Dorothy had enough penicillin to give

145 RCMP officers stationed at larger DEW Line sites and settlements often bore the burden of a larger workload. As a result of the expansion of the administration, the RCMP officers took on many additional duties. For example, at Frobisher Bay, RCMP officials handled issues pertaining to Inuit employment on the base, fulfilled Post Office duties, enforced Ordinances, assisted the DNANR and the IHS, distributed Family Allowances, managed Vital Statistics Records, and acted as the general liaison among military forces. By 1955, the RCMP at Frobisher Bay were already requesting an expansion of their forces in order to cope with the burden of responsibilities. Each officer worked an average of twelve or more hours a day. LAC, RG85, Northern Affairs Program, Series D-1-A, Volume 1120, File 1000/169, Access Code 31, Part 4, Constable B.A. Deer, “Conditions General – Frobisher Bay Detachment Confidential Report for Month of June 1955,” 13 July, 1955, 2.
the woman one dose, the “sight of her badly depleted stock of antibiotics unnerved her.” She needed to consult a doctor and evacuate the woman for further treatment. Leaving another Inuit woman to look after her patient, Dorothy ran to the HBC post and attempted to contact the doctor at Pangnirtung; however, because Dorothy had to treat her influenza stricken patients and monitor the condition of her cyanotic patient, the responsibility for contacting the doctor at Pangnirtung fell to Don, the local HBC employee. Poor weather prevented Don from immediately contacting the doctor and he worked for hours before getting through. When the woman’s condition worsened, Dorothy asked Don to send out a mayday call. Don worked tirelessly to ensure that help arrived. Eventually, a ham operator in Halifax answered his call, and they then phoned Ottawa, where the DNHW relayed the message to Frobisher Bay. Dr. Howerd happened to be visiting Frobisher Bay at the time and he took a helicopter to Lake Harbour to examine and evacuate the woman. Without Don’s persistence, Dorothy might never have been able to contact Dr. Howerd for help. The cooperation of HBC employees frequently allowed nurses and doctors to receive external medical opinions and guidance, and enabled the coordination of evacuation flights in emergency situations.

Finally, perhaps the most significant contributors to the successful expansion of Northern health care were Inuit themselves. Inuit did not simply allow the imposition of a new health care system; many took an active role in facilitating its implementation. For example, most nurses and doctors had the help of an Inuit aide, who acted as a translator and guide. Donalda Copeland had the help of Tommy and Dorothy had the help of Ishawkta. Tommy frequently acted as

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146 Lee, Lutiapik, 75-76. “It amazed [Dorothy] that Health and Welfare assumed the employee of a private trading company would automatically accept responsibility for contacting the outside world on the department’s behalf.” Lee, Lutiapik, 76.

147 Lee, Lutiapik, 77-79.
Donalda’s interpreter and helped her convince Inuit to agree to treatment in the South. Even Dr. Howerd, who did not have a formal guide or translator, requested the help of Ouha, an Inuit woman from the Old Settlement, when required. Whenever Dr. Howerd needed to convince a patient to receive further treatment in the South, he asked Ouha for help. She “would come and sit before the patient ... Ouha’s arms would slice the air as she emphasized each point, and she would talk on and on, never raising her voice in anger. At last her brown, weather-beaten face would crinkle into a smile and she would turn to me and say, ‘O.K., doc, he go.’” Thus, the importance of Inuit translators cannot be understated. They facilitated communication between the health care practitioners and their patients and effectively supported the administration of health care. At times, the Inuit did more than merely translate and persuade; they took direct responsibility for the provision of health care services.

Dorothy struggled to manage the influenza outbreak following her arrival in Lake Harbour. She quarantined the settlement, hospitalizing every Inuit who registered a temperature of more than 100°F. Within a matter of days, her “Quonset hut ward was jammed with Inuit. Mattresses were spread on the floor, and relatives of the patients sat, or stood around chatting or attending to the physical needs of their ailing wives, husbands, or children.” These Inuit did not sit idly by waiting for Dorothy’s treatment. Instead, they “unquestioningly took charge of the toilet patrol, as well as feeding both the sick and themselves from the hospital’s kitchen stores.”

When Mike Gardener, the Lake Harbour Anglican missionary, arrived the next day to help, there was little for him to do. The Inuit performed their self-appointed duties proficiently,
allowing Dorothy to focus on entirely on providing medical treatment. Although Inuit are
often portrayed as passive beneficiaries in the expansion of the Northern health care system, an
examination of memoirs and biographies reveals a different narrative. Their active involvement
in providing health care contributed significantly to the development of the health care system
and the provision of health services in the North.

Conclusion

An examination of Northern health care policy in the 1950s reveals several government
intentions and motivations. Some government policies, particularly those involving sanitation
and personal hygiene, aimed to acculturate and integrate Inuit into the larger Canadian society, as
Tester and Kulchyski theorized. Health care policy also supports Duffý’s theory of paternalism,
as many government policies and individual initiatives of health care practitioners were
paternalistic in their implementation. Finally, the evidence confirms Damas’ findings in Arctic
Migrants/Arctic Villagers. Humanitarianism motivated the actions of government officials and
medical health professionals in the framing and implementation of Northern policy, but financial
considerations and limited human resources hindered the government’s ability to improve the
health care system.

Northern health care owes its development to several factors. Although the construction
of the DEW Line did not revolutionize the health care system in the region, it facilitated an
expansion of Northern health services. The DNANR and the DNHW secured some human and
financial resources to hire more medical staff and create new programs to promote improved
Inuit health, but they still faced resource shortages throughout the decade. The nurses and
doctors stationed in the North made significant contributions to the overall health and welfare of

\[152\] Lee, Lutiapik, 74.
the communities that they served. Most significantly, the expansion of health care and the importance of community cooperation enabled Inuit to play an active role in developing the Northern health care system. As Damas suggested, some Inuit chose to adapt and to facilitate the developments occurring in the North. Thus, the development of Northern health care resulted from the combined efforts of government officials, health care practitioners, and Inuit themselves.
The New “Eskimo”

Adult Education and Vocational Training for the Inuit

We went there for three months as trainees on heavy equipment, truck driving, Cats skinning and grader operation ... There was thirty of us, when it first started but later on they took another thirty from here, another thirty from there...they had about two hundred that was trained but there’s only about eight D-8s in the North! Put it that way...ah...ah...ah...

Abraham Okpik153

In January 1957, Henry Anderson, an Inuk employed by Imperial Oil in Norman Wells, arrived in Calgary to take the diesel machines training course. Henry had taken the Imperial Oil plane from Norman Wells to Calgary and arrived in the city with no money and, most importantly, no directive. T.H. Taylor, the Vocational Training Coordinator, had not approved Henry’s enrolment in the course and thus refused him admission. The vocational school transported Henry to Edmonton, where he stayed at the Alberta Hotel until a return trip to Norman Wells could be arranged.154 The DEW Line vocational training programs had just begun and some Inuit, such as Henry, had a great desire to participate in them. Although the federal government offered vocational training to Inuit employees prior to the DEW Line era, the government limited the initial programs to select individuals.155 DEW Line construction led some government officials to conclude that the time for modernization in the North had arrived, leading the DNANR to expand its Inuit vocational training programs.

155 A few Inuit were employed by various government departments and military services prior to DEW Line construction. Some Inuit also found employment with mining companies in the early 1950s. LAC, RG85, Northern Affairs Program, Series D-3-a, Volume 743, File 1012-1, Access Code 31, Part 2, “Notes on the Agenda for the Third Meeting of the Special Committee on Eskimo Affairs, to be Held October 20, 1953,” 4.
The Department of Northern Affairs and National Resources’ Education Division created official vocational training school programs and increased the number of enrolment positions. The department did not simply grant admission to any Inuk interested in vocational training. Most admitted applicants had the endorsement and recommendation of a government official, such as a Northern Service Officer (NSO) or RCMP officer, and previous experience in wage labour. The stringent recruitment guidelines reflected the DNANR’s desire for Inuit success in the vocational programs. Inuit achievement reflected well on the department’s efforts to assist the Inuit in their transition to a modern wage economy and reinforced the department’s stance on Inuit integration; Inuit who succeeded in the program and in their subsequent careers proved that Inuit could be integrated into modern Canadian society.

Accordingly, the government designed the vocational training programs to achieve two primary objectives: to prepare the Inuit for the emerging modern economy by equipping them with new, relevant, technical skills and knowledge; and to use vocational training as a method of socialization and integration.

**Pre-DEW Line Programs**

The DEW Line project justified the rapid expansion of the Inuit vocational training program, but it did not introduce the concept. Formal vocational training programs, such as the rehabilitation program, existed prior to DEW Line construction. The rehabilitation program recruited “incapacitated” Inuit who, due to illness or treatment, could not return to the traditional hunting and trapping life. The department established the Rideau Health and Occupational Centre as an experiment to determine “what [could] be done to train seriously incapacitated
Eskimos who are wholly unfit to return to the Arctic so that they may take up occupations elsewhere.”

These rehabilitation programs comprised only one component in a larger Inuit training program. By 1953, the government had established a three-pronged plan for Inuit vocational training. The primary objectives of the program were: to select “promising young men” for training at technical centres where “they may be prepared to take up positions in the Arctic”; to provide training at rehabilitation centres and elsewhere for “incapacitated” Inuit so that they could be at least partially self-supporting; and to provide “advanced education and training” to young Inuit to prepare them for work in and out of the Arctic.

Before the 1950s, most Inuit lived a migratory lifestyle that inhibited formal training and education. The postwar decline of the white fox fur market, however, increased Inuit dependence on government assistance and alternative forms of wage earning. The introduction of family allowances, the opening of schools, and the possibility of employment near military bases and settlements provided incentive for Inuit to adopt a less migratory pattern and to congregate in larger communities. As more Inuit began to settle into permanent or semi-permanent communities, the government’s ability to monitor and administer services to the Inuit increased. Coupled with expansion of administration in the years leading up to and during DEW Line construction, the government was able to generate interest in vocational training and had the capacity to contact and organize Inuit trainees.

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156 LAC, RG85, Northern Affairs Program, Series D-3-a, Volume 743, File 1012-1, Access Code 31, Part 2, “Notes on the Agenda for the Third Meeting of the Special Committee on Eskimo Affairs, to be Held October 20, 1953,” 2.
157 LAC, RG85, Northern Affairs Program, Series D-3-a, Volume 743, File 1012-1, Access Code 31, Part 2, “Notes on the Agenda for the Third Meeting of the Special Committee on Eskimo Affairs, to be Held October 20, 1953,” 4.; For example, Paul Ilgok was transferred to a rehabilitation centre in Ottawa, because he had become paralyzed from the waist down. He was to receive training that would enable him “to do something towards making his own living” if he returned to the Arctic. LAC, RG85, Northern Affairs Program, Series D-1-A, Volume 1474, File 252-3, Access Code 31, Part 1, W.L. Falconer to Reverend John R. Sperry, “Re: Paul Ilgok,” 5 December, 1953.
158 LAC, RG85, Northern Affairs Program, Series D-3-a, Volume 743, File 1012-1, Access Code 31, Part 2, “Notes on the Agenda for the Third Meeting of the Special Committee on Eskimo Affairs, to be Held October 20, 1953,” 5.
By 1958, the rehabilitation program had expanded to include social education and “incidental academic education.” Patients returned to their homes where they received further academic education (provided by the Education Division), vocational training, on-the-job training, and an eventual job placement. Some students received government funding and attended vocational schools in Edmonton. The DNANR even created community projects which simulated a modern wage economy and its job opportunities. For example, one rehabilitation centre operated a laundromat out of the airbase, a movie theatre, facilitated crafts projects, a bakery, a butcher shop, and even a housekeeping class for its female residents.

Between September 1957 and April 1958, the centre housed and fed 185 Inuit. Although they included transient travellers, the department believed that “once this program [was] in full swing, [they would] be able to deal with many of the difficult individual social problems in the Eastern Arctic” and encourage and facilitate the social integration of Inuit into modern Canadian society. For example, the bakery’s bread provided “a much more satisfactory food than the bannock which was previously used” and recreational programs, such as the movie theatre and the crafts project, increased wage earning and “solved the “problem of idle women.” Most significantly, the rehabilitation programs demonstrated “to the [Inuit] the way in which our community operates in a practical manner which should result in more rapid learning and greater...
understanding.” The rehabilitation programs, like subsequent DEW Line training programs, facilitated and encouraged the economic and social integration of Inuit.

**Modernization**

Although the early rehabilitation programs provided limited access to vocational training experiences, the government did not feel an immediate need to expand the vocational programs until DEW Line construction began. Inuit proved to be satisfactory employees, creating an immediate demand for Inuit labour on the Line. Furthermore, the construction companies frequently requested permission to hire more Inuit labourers and discussed the possibility of offering full-time, permanent, maintenance positions to suitable employees. Consequently, the government identified an immediate and future need for Inuit labour. Furthermore, Inuit sought wage employment. The demand for labour and the existence of a potential supply of employees, who wanted to meet that demand, provided the necessary justification for the creation of new vocational programs.

**Demand for Inuit Labour**

Officials recognized the DEW Line’s potential to create a significant number of jobs for Inuit before construction began. In contrast to Bishop Marsh, who believed that the DEW Line would only generate 200 Inuit positions, F.J.G. Cunningham anticipated opportunities for many more. Cunningham acknowledged that there would be a limited number of technical jobs as

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163 In 1958, the government began distributing written materials to Inuit communities, explaining the nature and purpose of rehabilitation programs, and requesting Inuit involvement and feedback. LAC, RG85, Northern Affairs Program, Series D-1-a, Accession 1997-98/076, Box 20, File 252-4, Access Code 90, Part 2, “Tape Recording in Eskimo by M.L. Manning on Rehabilitation,” 14 July, 1958. The department could more readily distribute surveys and information, because Inuit families began moving into permanent and semi-permanent communities to gain access to DEW Line resources and opportunities. Although the began settling in communities before DEW Line construction commenced, DEW Line construction accelerated the process.
radio operators, motor mechanics, carpenters, teachers, and nurses’ aides, but he believed that “the constantly increasing number of white installations in northern Canada” would create additional jobs for vehicle operators, utility men, and other unskilled workers. Cunningham, and his colleagues, had several reasons to believe that the demand for Inuit labour would persist beyond the construction phase of the DEW Line.

In 1955, DEW Line Progress Report No. 11 inferred “that at least a portion of the Eskimos presently employed during the construction phase would continue to be employed during the transition period through the subcontractor.” The construction companies seemed pleased with their Inuit employees, giving the government little reason to expect otherwise. Cunningham reinforced government expectations in his March 1955 report; Inuit proved “quite satisfactory to the construction company” and that the department should expect the number of Inuit employed to steadily increase over the course of construction. Similarly, A.J. Boxer, the Northern Service Officer for the Northern Construction Company in the Western Arctic, reported that the foreman at DEW Line sites PIN-3, BAR-2, and BAR-4 had “expressed satisfaction with the Eskimo employees and stated his desire to obtain more Eskimo as equipment becomes available to allow the pursuit of the program on a broader basis and with greater vigor.” Thus, not only were the construction companies happy with Inuit labour, but they were requesting permission to hire more Inuit workers. T.H. Taylor travelled across the Western Arctic to

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164 Bishop Marsha was the Bishop of the Arctic. LAC, RG22, Indian and Northern Affairs, Series A-1-a, Volume 805, File 40-8-9, Access Code 32, Part 1, F.J.G. Cunningham, Memorandum for the Deputy Minister, 2 February 1954, 2.
166 The construction companies hired more Inuit employees than required, so that if an Inuk wanted to take check their trap line or go seal hunting, they could temporarily leave the position without inconveniencing the construction company. LAC, RG85, Northern Affairs Program, Volume 2271, File A1009-11, Part 1, F.J.G. Cunningham, “The DEW Line,” Memorandum for the Deputy Minister, 25 March, 1955.
examine the progress of Inuit employees at various DEW Line stations. In Aklavik, he met with William O’Connor, the Chief Mechanic for the Western section of the DEW Line. O’Connor “spoke very highly of Eskimos whom he had working for him as mechanics’ helpers, and he felt that these people are quite adaptable to this kind of work.”

The demand for Inuit employment increased by 1957, just as Cunningham had predicted. The Department of Transportation revealed in February that it planned to employ forty Inuit at its base in Frobisher Bay. The next month, Federal Electric was prepared to offer permanent DEW Line positions to suitable Inuit who could be trained to operate and maintain various components of the DEW Line sites. An initial estimate identified approximately one hundred permanent jobs. The department increased the estimate to one hundred and fifty positions after they accounted for three to four months of holiday time (for hunting) and another three to four months for yearly training, for each employee. Thus, the high demand for Inuit labour in DEW Line maintenance and operations justified the creation of formal vocational training programs.

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169 Mr. Peterson, the Assistant to the Administrator of Airports under the Department of Transportation, expressed interest in training the Inuit and improving their mechanical skills. LAC, RG 85, Northern Affairs Program, Series D-1-A, Volume 232, File 680-1-5, Access Code 31, Part 1, J.P. Richards, Memorandum for File copy, 5 February 1957.


Inuit Desire for Employment

Demand was not enough. In order for the program to succeed, Inuit had to be interested in wage employment and in receiving vocational training. Fortunately, officials noted this interest as soon as DEW Line construction began. When Northern Service Officer R.D. Van Norman visited Padloping Island in March 1955, he had the opportunity to speak to local Inuit. By his accounts, they seemed pleased to be offered employment. Five of the men already worked part time for the Royal Canadian Navy, and they were eager to earn more.172 B.G. Sivertz, Chief of the Arctic Division and Deputy Minister to the Director of the Northern Administration and Lands Branch, believed that the traditional Inuit lifestyle was quickly fading. He questioned:

Even if [it] were true that we should not educate and train and employ Eskimos, one can ask, what should be done as an alternative? Year by year these people are becoming more numerous, and their game resources are diminishing. Is there any answer but relief? And is that good for them? All these arguments lead back to the same thing, i.e. if we are to avoid interfering in the life and culture of the Eskimo people we must leave them alone. This means among other things not feeding them when they starve and not treating the sick. It also means not preaching Christianity to them or trading with them. All of these things, if brought to the Eskimo, open avenues that lead on and on to increased participation in the life of the big world.173

If it was increasingly more difficult for Inuit to live off the land, the only humanitarian option appeared to be providing vocational training to prepare Inuit to transition into a modern, wage-earning economy.

Vocational Schools

The DNANR recognized that the general Inuit population lacked the skills and qualifications for immediate employment on the DEW Line. Given that anticipated vocational programs were not ready to enroll Inuit at this point, the government suggested an alternative

173 LAC, RG 85, Northern Affairs Program, Volume, File A1009-1, Part 7, B.G. Sivertz, Memorandum for Mr. A.J. Boxer, 13 September, 1955, 2.
model of employment: an unqualified Inuk started as a trainee and was promoted to regular status once their employers were satisfied with their work. While labour positions would require little training, men in semi-skilled positions would presumably receive on-the-job training and experience. An alternative method would be to provide vocational training to one individual at a time. For example, David Panioyakak received a contract training course on the maintenance of heavy mechanized equipment from the Royal Canadian Air Force (RCAF). In light of David’s exceptional performance in the course, the RCAF expressed the desire to “upgrade” David’s position to equal that of a Qallunaat with the same qualifications. Stories such as David’s demonstrated that Inuit had the capacity to succeed in vocational training programs. Thus, Sivertz suggested that other government departments and private companies could adopt this temporary method of individual training until the DNANR developed a larger vocational training program.

In August 1955, T.H. Taylor visited DEW Line sites in the Western Arctic to look for prospective trainees. He spoke with Mr. Arnes, the superintendent of the Tuktoyaktuk site, about the progress and performance of Gui Omilogituk and Joe Teddy, who both received training as cat skinners from the Northern Construction Company. Arnes expressed satisfaction with Gui and Joe’s performance and subsequently offered both men full-time employment. These Inuit proved that they had the capacity to succeed in their vocational training programs,


Vocational training programs were also being created for women. During his trip, Taylor met Beverly Semmler whom he recommended for training as a hair stylist. Taylor believed that she could return to Aklavik and establish a hairdressing business at the new town site. Taylor also met Agnes Moses and Susie Huskey. He recommended that they be sent to Alberta College to receive their grade nine and ten credits, before being sent to a secretarial course so that they could obtain secretarial positions in the future. LAC, RG 85, Northern Affairs Program, Series D-1-A, Volume 232, File 680-1-5, Access Code 31, Part 1, T.H. Taylor, Memorandum for Mr. L.A.C.O. Hunt, 15 August 1955, 1.

which provided them with more than just technical knowledge and training. The training schools also informally socialized trainees to Southern culture and society.

For example, Elijah Kotok and Peter Thrasher received training in the South and frequently interacted with the men who worked at the plant. The other plant employees “went out of their way to be pleasant outside [of] the shop” and took Elijah and Peter for drives on Sunday. They went to Niagara Falls, out bowling, to hockey games, and plant employees’ homes.178 The plant employees introduced Elijah and Peter to Southern Canadian pastimes, and provided the trainees with some knowledge and understanding of Euro-Canadian culture through informal, social interaction. Elijah and Peter’s experience demonstrated how informal components of vocational training could facilitate Inuit acculturation.

The DNANR committed to expanding the vocational training program in 1956.179 Its primary objective was to train Inuit for permanent DEW Line employment.180 That June, the government arranged for a program to train fifteen people in carpentry at the Provincial Institute of Technology and Art in Calgary, Alberta, and in the operation of general heavy equipment at the Fairview School of Agriculture, Fairview, Alberta.181 The Department decided that vocational training should be offered to Inuit who “demonstrated ability and adjustment to wage employment.”182 Officials hoped that by selecting training candidates based on effort and performance, Inuit would feel “rewarded” and motivated to maintain their level of performance.

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181 While the Department worked on developing the group vocational training programs continued, they continued to promote small-scale individual vocational training, where one or two Inuit might be sent out for training at a time. LAC, RG 85, Northern Affairs Program, Series D-1-A, Volume 232, File 680-1-5, Access Code 31, Part 1, “Re: Vocational Training of Eskimos,” Memorandum for Mr. J.P. Richards, 21 June 1956, 1-2.
during the operational phase of the DEW Line. In recognition that not all Inuit employees worked in a specific field of labour, the Department decided to consider Inuit applicants who exhibited interest in (and had the potential to do well in) DEW Line work if provided with vocational training. Thus, by the end of 1956, the government solidified plans for larger, group vocational training programs and had set general criteria for the types of employees who might qualify. The DNANR now had to finalize the curriculum and course details.

In January 1957, the department decided that the DEW Line vocational training program would ultimately provide vocational training to sixty Inuit DEW Line employees. The trainees would be divided into two groups of thirty, which enabled one group to continue working on the DEW Line while the other received training. Each employee would receive three to four months of training each year, although the department recognized that they could not produce qualified tradesmen in such a short period of time. Consequently, the DNANR viewed the program as an apprenticeship; the employee would work for a period of time, before receiving further education at a training facility. As the employee gained more knowledge and experience, his salary would increase to reflect his progress and the value of his work. The curriculum would focus on heavy equipment and “driver maintenance,” and train Inuit in the operation of truck-type and tractor-type vehicles.

183 It was hoped that these men would “serve as a nucleus for the training of other Eskimos at the various sites.” LAC, RG 85, Northern Affairs Program, Series D-1-A, Volume 232, File 680-1-5, Access Code 31, Part 1, F.J.G. Cunningham, “Re: Selection of Eskimos for Vocational Training on Western Section of Dew Line,” Memorandum for the District Administrator, Fort Smith, N.W.T., 1 August 1956.
186 Truck-type vehicles were gasoline operated and included semi-trailers, aircraft-starter types, fuel trucks, water trailers, “cherry picker” trucks, bombardiers, and weasels. Tractor-type vehicles were diesel operated and included fork lifts, D-8 tractors with blades, rotary snowplows, and D-4 tractors. LAC, RG 85, Northern Affairs Program,
Recruitment

The vocational training programs stimulated significant interest from Inuit employees, but they could not apply for vocational training directly. In order to become a candidate, the prospective trainee had to be recommended by a Northern Service Officer or, if the community did not have an assigned NSO, another government representative (such as an RCMP officer). The selection standards for vocational training in 1955, when the program had only just begun to expand, formed the foundation for future trainee candidate criteria. For example, F.J.G. Cunningham described two selected Inuit trainees as possessing “high personal integrity” and being of “good character.”

When the time came for trainee selection in 1956, NSOs and RCMP officers recommended Inuit whom they believed to be of good character, even if they had little education or work experience. For example, Van Norman recommended Koomardtuke for vocational training, even though Koomardtuke did not speak much English. The other Inuit felt that Koomardtuke might have been “a little crazy,” but Van Norman felt differently. Koomardtuke had worked on the DEW Line for three months and was “the best Eskimo to be employed in the Eastern Arctic.” Koomardtuke was “exceptionally clean” and interested in engines. Van Norman found him to be quiet, pleasant, and full of initiative. Van Norman asserted that the other Inuit did not understand Koomardtuke’s desire to “change himself and take up employment,” but Koomardtuke’s personal character made him a good candidate for training. Indeed, Van Norman

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187 At times, the construction companies also recommended Inuit for further training. LAC, RG 85, Northern Affairs Program, Series D-1-A, Volume 232, File 680-1-5, Access Code 31, Part 1, Memorandum for the Director, 6 September 1956.
handpicked all of his recommended candidates. Those who received his highest recommendations appeared to be hard working and agreeable men with a strong desire to engage in wage labour and to further their education through vocational training. Thus, character – as perceived by local authorities -- played a significant role in the selection process.

Not every community displayed strong enthusiasm or interest in wage employment and vocational training. For example, Douglas E. Wilkinson, the NSO for Baker Lake, reported that he experienced “considerable difficulty” in preparing a list of Inuit who “might be suitable applicants for employment on the DEW Line.” The majority of families in the area still lived off the land and rarely visited the settlement for periods longer than a single day. During the summer construction season, the FEC had to hire Inuit who already had permanent jobs in other establishments to make up a local construction crew. Few Inuit expressed interest in wage employment, because they could sustain a comfortable living hunting and fishing. The only Inuit available for recommendation, Wilkinson noted, had “problem personalities” and he did not

192 Of the twelve Inuit employed by whites, only two were from Baker Lake. The others were immigrants from the coastal regions where part time wage employment had been the “standard practice for some time.” LAC, RG 85, Northern Affairs Program, Series D-1-A, Volume 232, File: 680-4-1, Access Code: 31, Part 1, D.E. Wilkinson to Chief of the Arctic Division, “Employment of Eskimos by Federal Electric,” 12 March 1957, 1-2.
recommend them.\textsuperscript{193} Thus, while the DEW Line project increased the number of wage labour positions in the North for the Inuit, and while a significant number of Inuit men took an interest in vocational training, some communities still preferred their traditional way of life.

\textit{The Curriculum}

In 1957, the DNANR's Education Division launched its first series of DEW Line training courses in Leduc, near Edmonton, Alberta.\textsuperscript{194} The department wanted to provide Inuit employees with the technical skills and knowledge they required for future work on the DEW Line. The vocational curriculum reflected the government's objective and focused primarily on DEW Line machinery and maintenance. Additionally, the Education Division designed the program to provide a diverse, and flexible, vocational education. When the first group of thirty Inuit arrived in Edmonton for training, they were divided into two groups of fifteen.\textsuperscript{195} Trainees received one month of training on diesel equipment and one month on gasoline operated equipment, providing them with the skills and knowledge to operate either machine type.\textsuperscript{196} Each morning, instructors arranged the trainees into three groups. While one group received basic mechanics training in the shop, the other two groups received training in the field. In the field, one group received instruction on operating trucks, graders, and bulldozers, and the other received instruction on maintenance and repair procedures for the same equipment. On occasion, films were used to


\textsuperscript{195} In 1957, the Department planned for the training of three groups of 30. Each group would spend two months at Hewitt Equipment Limited, and another two months at White Motors. The program cost a total of $940 per person for the two month period. LAC, RG 85, Northern Affairs Program, Series D-1-A, Volume 232, File: 680-4-1, Access Code: 31, Part 1, R. DeGrandpre to Director of Northern Administration, 7 March, 1957, 1, 3.

instruct the trainees; however, most of the training involved practical, hands-on experience so that the trainees could learn by doing.  

In addition to mechanical training, the vocational curriculum included English classes for Inuit trainees. Language instructors divided class time into multiple periods, leading different activities each period to “allow for a change of pace and method in order to maintain keen interest.” Each English session began with mimicking exercises, in which Inuit repeated words, sentences and phrases after the instructor. The instructor then produced flash cards and the trainees took turns reading the cards out loud and using them to form sentences. The class proceeded to read from the study book and then completed fill-in-the-blank exercises in their workbooks. These activities were followed by a break, during which time the instructor led a conversational session while the men smoked or went for a stroll outdoors. After the break, the instructor reviewed the material covered in the previous sessions, and then proceeded to play games involving the English language.

These English sessions were rigorous and took up a significant portion of vocational training. Government officials recognized that the Inuit trainees needed to have a good grasp of the English language if they hoped to obtain suitable employment. Most potential employers operated in English, not Inuktitut. The addition of English to the vocational curriculum helped to meet the explicit needs of the modern wage economy. The DEW Line programs provided Inuit

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199 In keeping with the rhetoric of modernization, Cunningham noted that “special efforts [were] being made at Leduc to teach English to the Eskimo trainees. This phase of the course will have far-reaching effects on the gradual integration of the Eskimo and Indian into the wage earning economy of the Northwest Territories [...] The Leduc course [...] will also create a nucleus of trained Eskimos and Indians that will no doubt provide a source of “land hands” and foremen for future industrial and defense developments in the North.” LAC, RG 85, Northern Affairs Program, Series D-1-A, Volume 506, File 680-4-, Access Code 31, Part 1, F.J.G. Cunningham to D.M. Watters, “Leduc Heavy Equipment Training Course,” 30 October, 1957, 1-2.
trainees with the technical and linguistic skills and knowledge required for entry into the wage economy.

Social Acculturation and Integration

Vocational schools served a secondary purpose in acculturating and socializing Inuit trainees, in preparation for eventual integration. The curriculum included courses on acceptable social and cultural practices in modern, Southern society. For example, instructors covered the importance of guarding one’s personal health by maintaining proper eating and sleeping habits, cleanliness, and personal hygiene, and school rules and regulations discouraged unexcused absences and tardiness. Course instructors took attendance in the morning and afternoon sessions, recording any absences or late arrivals. The department hoped that the enforcement of strict rules and regulations would encourage Inuit trainees to change their personal habits to match the standards of modern society.

The DNANR viewed the vocational training program as a “tremendous” financial and human investment. In a memorandum to the Deputy Minister, F.J.G. Cunningham wrote that the department could not “allow [the Inuit trainees] to fail because of either inadequate supervision of training or failure to meet the serious and delicate problems of adjustment faced by the Eskimo in this new experience.” In an attempt to ensure the successful transition of the Inuit into wage employment and the modern economy, the DNANR made a conscious effort to supervise the Inuit trainees constantly during their time in the South. For example, program rules

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200 Instructors expected the trainees to arrive on time. Anyone arriving after 8:30am or 2:00pm was recorded as being late. In doing so, the Education Division hoped to stress importance of punctuality to Inuit trainees. LAC, RG85, Northern Affairs Program, Volume 1340, File 680-4-1, T.R. Bleiler to Mr. J.V. Jacobson, “The first two weeks of operations Eskimo Vocational Training Course, Leduc, Alberta,” 5 April 1957, 4.

201 The government focused on teaching personal hygiene and sanitation to the Inuit in the 1950s as they viewed both qualities as being key to preventing illness and its spread, and as a sign of first class citizenship. This may explain why lessons in personal hygiene and sanitation were included in the school curriculum.

prohibited Inuit trainees from leaving Leduc between noon on Saturday and 8:30am on Monday without first reporting to the officer in charge and obtaining his permission. Furthermore, trainees had to obtain permission from a supervisor before spending a night outside of Leduc.\textsuperscript{203}

Edmonton, a big city that presented numerous opportunities for Inuit to engage in socially dangerous behaviour such as excessive drinking, was not located far from Leduc. An incident concerning Abraham Allen and Albert Bernhardt, two trainees at the Leduc facility, reinforced the government’s concern for the moral wellbeing of Inuit trainees. On 31 March 1957, the two Inuit were arrested in Edmonton for intoxication. Abraham and Albert met an old friend who had worked with them on the DEW Line in Edmonton. The three men went to the Lealand Hotel where they consumed three bottles of beer each. Then Abraham and Albert got in a cab and successfully convinced the driver to purchase a bottle of Rye Whiskey for them. Abraham and Albert proceeded to rent a hotel room, where they shared, and finished, the bottle of whiskey. Abraham offered to get another bottle, left Alfred in the hotel, and went looking for a cab; however, Abraham could not convince the new cab driver to purchase more liquor for him. At this time, Abraham saw Alfred walking down the street and left the cab to join him. The Edmonton police arrested both men soon after and turned them in to the RCMP. Abraham and Alfred were reprimanded by A.J. Boxer, who told them that “while they were on the Training course … the Department was responsible for them … [and] their actions.” The DNANR was particularly concerned about disorderly behaviour amongst the trainees, because “it would give a bad name to the Training program, to the Trainees and to all the Eskimo people.”\textsuperscript{204}

\textsuperscript{203} LAC, RG85, Northern Affairs Program, Volume 1340, File 680-4-1, T.R. Bleiler to Mr. J.V. Jacobson, “The first two weeks of operations Eskimo Vocational Training Course, Leduc, Alberta,” 5 April 1957.

\textsuperscript{204} LAC, RG85, Northern Affairs Program, Series D-1-A, Volume 1340, File 680-4-1, Access Code 31, Part 2, A.J. Boxer, “Eskimo Vocational Training at Leduc, Alta.,” Memorandum for Chief of Arctic Division, April 7 1957, 2.
Social drinking and alcohol consumption, in particular, threatened to undermine the success of the DEW Line vocational training program. Many Qallunaat men from Edmonton, who had been employed on the DEW Line and worked with the Inuit trainees, frequently visited the beer parlours. The Qallunaat frequently invited Inuit trainees to join them, considering “the offer of beer [as] a requisite of friendship.” The Department did its best to ensure that Inuit trainees knew the difference between acceptable and unacceptable behaviour, because the social interactions between Inuit and Qallunaat served as opportunities for Inuit to demonstrate responsibility and self-control; two attributes which contributed to good character and citizenship. Furthermore, the vocational program needed to maintain a positive reputation, because positive publicity drew attention to the successful transition of Inuit into wage employment and proved that Inuit could meet the challenges of “their new life” and flourish.

Therefore, the Department attempted to prevent the Inuit from developing social illnesses, such as alcoholism, and maintained the program’s positive reputation by enforcing strict rules and regulations on the trainees.

When trainees from Aklavik and Tuktuk discovered the Leduc beer parlour, A.J. Boxer sought to provide other forms of entertainment. For example, he arranged to have the trainees attend a cowboy show in Edmonton Stadium. He also planned other excursions for Inuit trainees, including field trips to the Calgary zoo, the fish hatchery in Calgary or Banff, the Provincial Museum in Edmonton, the aircraft repair plant of Northwest Industries, the Imperial Oil refinery,

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206 The Minister and Deputy Minister of the DNANR “constantly emphasized the need for positive public support.” Lack of public support could impede the progress of the entire program. LAC, RG 85, Northern Affairs Program, Series D-1-A, Volume 232, File: 680-4-1, Access Code: 31, Part 1, J.V. Jacobson to Mr. T. R. Bleiler, 12 April, 1957, 1.
and the Edmonton Fur Auction Sales. These activities introduced Inuit to modern Canadian society. The museum provided an opportunity to teach Inuit about Canada’s culture and history, or at least its dominant national narrative. Trips to the fish hatchery, Northwest Industries, Imperial Oil, and the Edmonton Fur Auction Sales introduced them to modern industries that might soon appear in the North, giving Inuit an opportunity to see the types of jobs they might obtain in the future. Thus, while social gatherings and excursions were not formal components of the vocational training program, program coordinators used them as an informal method of acculturating Inuit.

The Department initiated another formal program that was meant to teach Inuit social and fiscal responsibility. The married men enrolled in vocational training left behind families in the North, and officials questioned whether the responsibility for maintaining the welfare of these families belonged to the trainees or the government. In March 1957, F.J. G. Cunningham, Director of the DNANR, R.A.J. Philips, Assistant Chief to the Arctic Division, J.V. Jacobson, Chief of the Education Division, J.P. Richards, Assistant Chief to the Arctic Division, and W. Rudnicki, Chief of the Welfare Division, discussed three potential options: the government could pay the full living allowances at an agreed scale of $50 per month for a wife and $30 per child; the government could pay 50% of the agreed scale living costs of the dependents; or the government could make no payment to the dependents and leave their living expense to the trainees.

Those officials who favoured paying the full expense of the dependents presented five main arguments. First, it was important to enroll Inuit trainees in the vocational program and that

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207 LAC, RG85, Northern Affairs Program, Series D-1-A, Volume 1340, File 680-4-1, Access Code 31, Part 2, A.J. Boxer, Memorandum for Chief of Arctic Division, 23 April 1957, 5-6. Boxer noted that the Anglican Church provided the trainees with a hall in Leduc that had a rented T.V. set and games, such as checkers and cards.
“no financial impediments should be put in their way.” Second, they argued that because the course was organized on the initiative of the government, the government should be responsible for all of the expenses incurred. Third, they felt that the family’s living costs would place an unfair burden on Inuit who had money to support their family with, while Inuit who had no money would presumably have their dependents paid for by the government. They also feared that Inuit who had dependents in the North would face a severe financial disadvantage in comparison to the single trainees. Fourth, the government’s assumption of total family living costs would be simpler administratively than a program which recovered the costs of maintenance from the trainees. Fifth, and perhaps most significantly, the proponents of covering the entire cost of maintaining trainees’ dependents argued that the vocational training programs were experimental and the usefulness of the training could not be predicted. Thus, given the experimental nature of the program, the government should cover all costs.  

Other officials supported the option of having Inuit contribute to the maintenance of their families. They argued that the purpose of the course was to increase the earning power of the trainee, and they should make a contribution to at least one component of the program. Second, they argued that if the government paid for all of the families’ living expenses, they would be acting paternalistically—an approach the government wanted to avoid. They also feared that the maintenance of Inuit dependents might indicate a degree of favoritism for the Inuit over other groups that normally attended vocational training courses. The government wanted to demonstrate to the “tax paying public” that Inuit were ready and prepared to contribute, “at least a token amount to their own betterment.” Additionally, the trainees would only be asked to pay an amount totally approximately ten percent of the total cost of the course; an amount which was

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affordable to most trainees, since they had recently been wage earners. Finally, although the
government established the program on their own initiative, the trainees voluntarily accepted
enrolment, demonstrating initiative on their own part.\textsuperscript{210}

Ultimately, F.J.G. Cunningham decided that the trainees would contribute at least half of the finances required to support their families in their absence.\textsuperscript{211} The dependence maintenance payments served as a lesson in financial management for the trainees, as they had to apportion a specified amount of their income to maintain their families during their absence. They could not spend the entirety of their pay cheque, but had to save and budget for the future.\textsuperscript{212} To prepare for the modernization of the Northern economy, Inuit had to fully understand the standards that would be expected of them—an understanding promoted by the vocational training programs through formal and informal measures.


\textsuperscript{212}The importance of financial planning, and taking responsibility for one’s own welfare and the welfare of one’s family, were later reinforced in a new policy which required the Inuit trainees to pay for their own hospital bills, when able. LAC, RG85, Northern Affairs Program, Series D-1-A, Volume 1340, File 680-4-1, Access Code 31, Part 2, A.J. Boxer, Memorandum for Chief of Arctic Division, 23 April 1957, 8.
### Figure 1: Relief to Dependents of Inuit Receiving Vocational Training

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<th>Name</th>
<th>Wife</th>
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<th>Rate/Day</th>
<th># of Days</th>
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### Conclusion

An examination of vocational training seems to confirm Tester and Kulchyski’s theory of totalization, as the DNANR did their best to ensure that the courses and programs equipped Inuit trainees with all of the necessary technical, linguistic, and social skills required for successful integration into a wage economy. Imposed dependent relief payment programs also reflect a paternalistic approach to teaching Inuit financial responsibility. Nevertheless, Inuit agency existed even within the field of vocational training. Some Inuit men were eager to receive training and to adapt to the new economic changes occurring in the North; they did not simply allow the government to impose unwelcome regulations and education upon them. Some Inuit trainees actively decided to participate in, and prepare for, the changes occurring in the North. Furthermore, the expansion of vocational training programs, like health care, was limited by external influences, such as the laws of supply and demand. Thus, the intentions and motivations of the government in the creation and implementation of vocational training programs were multifaceted.

The complexity of government-Inuit relations was not confined to professional spheres of Inuit life. As the 1950s drew to a close, the social repercussions of DEW Line construction and government administration became increasingly clear. The process of Northern modernization
challenged the social fabric of traditional Inuit society, undermining or altering traditional hierarchies, relationships, and practices.
Civilization is now advancing into the Arctic areas at such a rapid pace that it is impossible for the Eskimo not to be affected. It is therefore essential that they should be assisted in every possible way to face the future in a realistic manner and in a way which will result in their becoming true Canadian citizens while at the same time maintaining their racial pride and independence of spirit.

J.V. Jacobson, 1953

In 1957, anthropologist J.D. Ferguson submitted a report to the Northern Research Coordination Centre, describing the changes occurring in the Western Arctic and the adjustment of Inuit to the DEW Line and wage employment. Ferguson believed that Inuit “now living in proximity to the D.E.W. Line [were] on the threshold of radical change in both their means of livelihood and their basic culture.” He witnessed a blended society and culture, in which old traditions and modern social and economic activities coexisted simultaneously. For example, some Inuit families continued conducting their spring fishing in the traditional manner, waiting for the ice to draw “away from the shores of the lakes and [for] the rivers [to] break free.” Then, “the Eskimos wade[d] along the shores with trident-like spears or dam[med] the rivers with boulders to create fish traps.” Yet, Ferguson noted, during the fall seal-hunt, some Inuit families used whale-boats while others took advantage of new transportation technology and used outboard-powered canoes. Likewise, Inuit exchanged their harpoons for rifles. In the winter, Inuit no longer camped on the sea-ice to hunt seal, but remained inland. While the men

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214 Ferguson did not see the changes as being generated from within Inuit society. He firmly believed that the changes in Inuit life were imposed by the white people. Ferguson, A Study of the effects of the DEW Line upon the Eskimo of the Western Arctic of Canada, 1.
215 Ferguson, A Study of the effects of the DEW Line upon the Eskimo of the Western Arctic of Canada, 5.
checked their trap lines, their families waited in “one of the major white settlements” or in a permanent winter camp. Inuit “snow house[s]” slowly vanished from the Western Arctic as primary shelters, becoming “temporary overnight shelter[s]” instead. Tents framed with lumber and insulated with cardboard and wood from discarded boxes replaced snow as the primary construction material for Inuit homes. Some Inuit had even settled into communities and built permanent houses. The foundation of Inuit society and culture seemed to be shifting and changing: a result, Ferguson asserted, of DEW Line construction and the implementation of a wage economy.\footnote{J.D. Ferguson, A Study of the effects of the DEW Line upon the Eskimo of the Western Arctic of Canada, (Ottawa: Northern Research Co-Ordination Centre, Department of Northern Affairs and National Resources, April 1957), 5, 9-10.}

As the Northern landscape changed, so did its people. Inuit modified their social practices to accommodate the expansion of government administration and regulation and the new modern wage economy. For example, marriage had to be officiated and registered with government officials to be legally valid—a precondition for Inuit to receive relief payments or appropriate salaries. The widespread employment of young men in wage labour also altered marriage patterns. The government attempted to regulate the process of adoptions, not fully comprehending the Inuit practice or its social and emotional implications. Wage labour redistributed power and prestige within Inuit communities, challenging traditional social hierarchies and disrupting traditional social relationships. Finally, the wage economy modified gender and family roles by moving economic activity out of the home and separating men’s work from that of their wives and children.
Changes in Social Practices

Marriage

During the 1950s, officials sought to bring Inuit under the same rules and regulations as other Canadian citizens. This required the government to monitor and record previously unregulated social practices such as marriage and adoption. Previously, Inuit women often entered arranged marriages soon after their first menstruation. In some instances, the elders in the family or community used arranged marriages to increase a young woman’s chances of survival.²¹⁷ For example, if the girl did not have parents or caregivers, elders arranged a marriage for her while she was “very, very young.” The elders recognized that young girls and children more generally needed a family if they hoped to survive. Until they could support themselves, young girls needed mother figures who could teach them important traditional skills, such as how to make seal-skin boots and caribou-skin parkas for the winters, and men who could provide food and shelter. Arranged marriages solved the issue of meeting these needs. Once a girl married, “[s]he would move in with a man … [and] her in-laws would look after her.”²¹⁸

In other instances, parents or adopted parents refused to let their daughters marry at a young age. By waiting, women entered marriages with more skills, such as sewing and braiding. Additionally, if her parents were older and required help and assistance, they would not allow their daughter to marry unless the man agreed to stay with their family. Alternatively, if the man’s parents needed help a woman was given to their family so she could look after her

²¹⁷ Apphia’s mother was married at the age of twelve or fourteen. Inuit women were considered adults when they reached puberty and, thus, were viewed as being ready for marriage. Although Inuit followed seasonal migration patterns, they often travelled the same route and set up camp in approximately the same locations year after year. Inuit also frequently camped with other families when the time came to settle in a region for the season. These families formed the core of their communities, beyond their extended family as they often saw these families every year. Nancy Wachowich in collaboration with Apphia Agalakti Awa, Saqiyuq: Stories from the Lives of Three Inuit Women (Kingston: McGill-Queen’s University Press, 1999), 36, 37.
²¹⁸ Wachowich et. al, Saqiyuq, 36.
parents-in-law.\textsuperscript{219} In an interview with social anthropologist Nancy Wachowich, Apphia Agalakti Awa, an Inuit woman born in the Eastern Arctic in 1931, stated that in her generation “every human being was useful. We would help each other in any way we could.”\textsuperscript{220}

The age of marriage for Inuit men differed significantly from that of Inuit women. Although marriages could be arranged at birth, a couple did not marry until the man proved his skill as an adequate hunter who could feed himself and his family. A man had to own his own dog team before he could marry. It took years for young men to learn how to be good hunters and trappers and to raise dog teams of their own. Thus, traditionally, men got married at an older age than women. These marriage practices began changing with the expansion of Northern administration.

Initially, Inuit married in the customs of their land and did not have to register their marriages. Local missionaries and RCMP officers did their best to keep a record of Inuit marriages prior to DEW Line construction. When J.D. Ferguson arrived in Tuktoyaktuk in 1957, for example, he discovered that all of the adults had been married by either the Anglican or the Roman Catholic church in the settlement.\textsuperscript{221} Tuktoyaktuk, however, was relatively well connected to the rest of Canada. Prior to 1939, four families had lived in the area permanently.

\textsuperscript{219} Wachowich et. al, \textit{Saqiyuq}, 37.
\textsuperscript{220} Wachowich et. al, \textit{Saqiyuq}, 37. Nancy Wachowich is a social anthropologist at the University of Aberdeen, Scotland. \textit{Saqiyuq} is the summation of Wachowich's interview with three Inuit women, Apphia Agalakti Awa, Rhoda Kaukjak Katsak, and Sandra Pikujak Katsak, who each represented a different Inuit generation. Apphia is the family elder, born in 1931. Rhoda is Apphia's daughter, born in 1957, and Sandra is Apphia’s granddaughter, born in 1973. The stories of both Apphia and Rhoda will be used to illustrate the influences of political, economic, and social changes on Inuit life in the North during, and immediately following, the construction of the DEW Line. Wachowich et. al, \textit{Saqiyuq}, 16, 151, 211.

\textsuperscript{221} While the Inuit seemed to have adopted some Christian marital practices, one man in the settlement still had a second wife “according to Eskimo tradition.” Ferguson recorded that “there was no friction within the family nor criticism on the part of the Eskimo community for this state of affairs. If anything, the other man paid him a grudging respect. The attitude of the European residents ran from amusement to indignation. Interestingly enough, a younger man claimed the second wife, who was about his age, and took her away during the summer period. Although he is a devout Catholic, he did not marry within his church. The girl was also a Catholic and her previous husband was Anglican.” Ferguson, \textit{A Study of the effects of the DEW Line upon the Eskimo of the Western Arctic of Canada}, 15.
When the Hudson’s Bay Company closed their post on Herschel Island in 1938 and moved it to Tuktoyaktuk, Inuit families from Herschel Island followed the trading post. More Inuit families moved to the area in 1942 when the Baillie Island trading post closed. The rest of the Inuit families in the far western Arctic moved to settle in Tuktoyaktuk in 1954 when the Stanton Mission closed. DEW Line construction provided further incentive for Inuit to settle semi-permanently or permanently in the area. With the only ship harbour in the Mackenzie River Delta, Tuktoyaktuk become a transportation hub in the latter half of the 1950s. Consequently, new economic activity attracted Inuit families and provided sufficient wage opportunities to sustain an Inuit settlement. Thus, the missionaries and government representatives had regular interactions with the local Inuit and could record, register, and monitor Inuit marital unions with greater ease.

The establishment of permanent Inuit settlements also enabled the government to use economic assistance as a reward for registering pre-existing marriages. For example, Apphia and her husband, Mathias, had been married in the Inuit tradition for decades and had ten children, with another on the way, before they married each other legally. In her interview, Apphia stated that she and Mathias got married “because [Mathias] was working and we needed money.” Because they were not legally married, when Mathias began working for the government, officials calculated his salary using the rate for a single man. Mathias’ salary could not support all of his children, but, if he and Apphia legally married, registered their marriage, and recorded the names of all their children, the government would adjust his salary to account for all of his dependents. Thus, Apphia and Mathias asked an Anglican minister to marry them in 1967. “If he hadn’t been working at the time,” Apphia admitted, “I wouldn’t have married him. It was the

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222 J.D. Ferguson, *The Human Ecology and Social and Economic Change in the Community of Tuktoyaktuk, N.W.T.*, (Ottawa: Northern Research Co-Ordination Centre, Department of Northern Affairs and National Resources, February 1961), 4, 51.
government’s idea that we get married. They told us to get married, so we did.”

For Apphia and Mathias, the decision to get married was an economic one.

The introduction of wage employment also enabled men to marry sooner. Many wage employment opportunities did not require any skilled labour. Thus, young men could earn enough money to support themselves and a family without spending years, or even decades, honing skills that a hunter and trapper would need to prove that he was ready to support a family. The substitution of wage labour in place of traditional skills served as a catalyst in a series of social changes surrounding marriage practices. Wage employment shifted the emphasis from having traditional survival skills, to having an income. In her interview, Apphia noted that marriage practices had changed significantly over time: “Today it is different. Today nobody has a job all the time. Today even if a man doesn’t have a job, he can still get married.”

Adoption

In addition to regulating marriage practices, the government began monitoring Inuit adoptions. Government officials and other Qallunaat generally misunderstand the social and practical necessity of the practice and its emotional impact on Inuit families and communities. For example, Donalda Copeland frowned heavily upon the practice. She described the process as the “Eskimo practice of handing out babies here and there for adoption ... I couldn’t understand how the rightful parents could so quickly hand away their own flesh and blood.” The underlying gender biases of the practice added to Donalda’s contempt for the practice. Having witnessed several adoptions following the birth of a daughter, Donalda sensed the importance placed on male children in this land where the well-being of the family depends on success in the hunt. Though girl babies were no longer being

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223 Wachowich et. al, Saqiyuq, 112.
224 Ferguson, The Human Ecology and Social Economic Change in the Community of Tuktoyaktuk, N.W.T., 53.
225 Wachowich et. al, Saqiyuq, 41.
226 Copeland et. al, Remember, Nurse, 46-47.
put in the snow to die, they were frequently handed out for adoption ... There were other times, too, when this giving out babies for adoption made sense. A childless or an elderly couple could thus be provided with young people to care for them, girls to chew the sealskin and to fashion their clothing, boys to trap the fox and to hunt the seal, the walrus and the polar bear. In still other cases, this handing out of new-born children was apparently done, like the trading of wives, at the whim of the fathers or as a result of a hunting bet.\textsuperscript{227}

The nurse had a vague sense of the practical need for adoptions, but could not reconcile her worldview with that of her community.\textsuperscript{228}

As the government’s administrative capabilities grew in the North, officials attempted to regulate and control the practice. During DEW Line construction, the community nurses and Northern Service Officer in Frobisher Bay took responsibility for finding suitable families for the children. The RCMP arranged the adoption “legally and formally … with their usual thoroughness.”\textsuperscript{229} Even families living primarily off the land found themselves subject to the will of government representatives and officials. For example, Apphia and her husband did not move into a permanent settlement until 1972.\textsuperscript{230} Still, the RCMP managed to interfere in their adoptions, albeit for good reason.

In 1946, Apphia gave up her first child, Oopah, for adoption. Arvaarluk, Apphia’s adoptive father, told elders in the community that he wanted Apphia to give her baby up for adoption, because he believed that fifteen year old Apphia was too young to have a baby. Arvaarluk died just before Oopah’s birth, but the elders informed Apphia of her father’s decision. Thus, Apphia gave Oopah to an Inuit couple living in Akkuniq and her and her husband

\textsuperscript{227} Copeland et. al, \textit{Remember, Nurse}, 63-64.  
\textsuperscript{228} Kitty, Donalda’s Inuit domestic aid, did not have any children, although she clearly demonstrated her desire for a child. Thus, when Annie, another Inuit mother, delivered yet another daughter whom her husband did not want, Kitty offered to adopt the child. Donalda expressed her displeasure at the adoption in her memoir, stating that Kitty had “added a fresh Chapter to [her] book of discouragement.” Copeland et. al, \textit{Remember, Nurse}, 197.  
\textsuperscript{229} Dr. Howerd knew very little about Inuit adoptions. He only knew what he had been told by other non-Inuit in the North: “The child is always loved by the adopting parents as if it were their own, but if they have more children born to them after adopting a girl, the adopted daughter may be expected to look after the home. She often wears a mother’s parka with a hood and carries the baby in it.” Howerd, \textit{DEW Line Doctor}, 114-115.  
\textsuperscript{230} Wachowich et. al, \textit{Saqiyuq}, 16.
left the settlement soon after. When they returned to Akkuniq, the Roman Catholic missionary told them to take Oopah back. The RCMP officers contacted the missionary earlier and told him that the adoptive family abused Oopah. Apphia and Mathias complied and took Oopah back.²³¹

By 1958, the perceived problem of “casual adoptions” still existed, creating a “number of serious difficulties” from the perspective of the administration. The government generally lacked an understanding of the Inuit practice. A report written on 16 June, 1958, expressed the view that the adopted child always suffered.²³² The author felt that, having spoken to local Inuit in Cape Dorset, that “adopting a child [could] often be a simple, inexpensive method of acquiring a household slave.” The adopted child always emptied the chamber pot, carried the water, and took care of the younger children in the household. Furthermore, Inuit comments about adopted children perplexed officials. When asked about a “shabbily dressed” child, “the foster parents look[ed] sad and [said] it [was] because it ha[d] no real father and mother taking care of it, (although the real father and mother may be living next door),” before directing attention to their well-dressed, biological, children. In another case, when an adopted boy’s foster parents died, he returned to his biological parents. His biological parents “treat[ed] him casually leaving him badly dressed and cared for because they explain[ed] they gave him away once so he [was] not really theirs!” While stories such as these substantiated the government’s

²³¹ Wachowich, Saqiyuq, 61, 63, 73. Apphia also gave up her fifth child, Jakopie, for adoption. The RCMP interfered in this adoption as well. Apphia gave her son to a childless couple, because she and her husband already had four children of their own. One month after the adoption, however, Jakopie’s adoptive mother died and the RCMP officers asked Apphia to take Jakopie back. Although Apphia and her husband were afraid of taking the baby away from the man who had only recently lost his wife, their fear of the RCMP compelled them to comply. Nancy Wachowich et. al, Saqiyuq, 90-91.

²³² The actual author of the report is unknown as the excerpt came from a monthly report and no one was credited with having drafted the report. The original report could not be found, and thus the author could not be determined. The report was likely written by a government representative, but whether they were a NSO, an RCMP officer, or a visiting official is unknown. LAC, RG85, Northern Affairs Program, Series D-1-A, Vol 1360, File 252-5/166, Access Code: 31, Part 1, “Child Welfare,” Extract from Monthly Report For December 1957, Cape Dorset, N.W.T., 16 June, 1958.
campaign to bring the practice into conformity with Canadian laws and standards,\textsuperscript{233} they did not accurately reflect the Inuit experience; certainly, some adoptions did go awry, but not all adoptions were whimsical, platonic exchanges.

Apphia’s biological mother, Suula, gave Apphia up for adoption, because Kublu, Apphia’s biological father, already had daughters and wanted a son. Suula “was not a very bossy woman and she was having a hard time at that point, so she had to listen to her husband. He was so much older than her. She couldn’t say no to him even though she was crying too much inside at the thought of having to leave [Apphia].” Kublu arranged to have Apphia adopted by her Suula’s uncle, Arvaarluk.\textsuperscript{234} Apphia’s adoption was not a quick and easy transaction and Suula struggled to give Apphia up. When Ilupaalik, Apphia’s adoptive mother, discovered “how much it hurt [Suula] to have to give [Apphia] up,” Ilupaalik allowed Suula to continue breastfeeding Apphia until Kublu decided to leave camp a month later.\textsuperscript{235} Although the government had good intentions in regulating and monitoring adoption, a contradiction existed between government accounts of Inuit adoptions and the Inuit experience.

\textit{Changes in Social Hierarchy}

In addition to regulating social practices, the construction of the DEW Line and the introduction of a wage economy upset the existing social order within Inuit communities by disrupting the traditional social hierarchy. In his study of the Western Arctic, J.D. Ferguson concluded that DEW Line employment substantially increased the income of its employees, although the increase of income varied (see figure 2). The casual trappers experienced a 400% increase in income.\textsuperscript{236}

\textsuperscript{234} Apphia explained that Kublu already had three other daughters from his first wife and needed a son who could help with hunting and providing for the family in the future. Thus, he did not want another daughter. Wachowich et. al, \textit{Saqiyuq}, 21.
\textsuperscript{235} Kublu had been accused of a crime and fled to Keewatin and Repulse Bay to escape prosecution, taking Apphia’s biological mother with him. Wachowich et. al, \textit{Saqiyuq}, 21.
J.D. Ferguson, *A Study of the Effects of the DEW Line upon the Eskimo of the Western Arctic of Canada*, (Ottawa: Northern Research Co-Ordination Centre, Department of Northern Affairs and National Resources, April 1957), 38. The data reveals a leveling out of the field, with skilled and average trappers generally earning the same gross income.

Increase in their gross income when employed on the DEW Line. Casual trappers earned approximately $300 from trapping and an additional $1 500 from DEW Line work. Comparatively, the average trappers’ gross income only increased by 200% when employed on the DEW Line; however, their net income became equal to that of a skilled trapper working on the DEW Line. Although an average trapper only earned $950 trapping, and a skilled trapper earned $2 000, both groups earned a total net income of $2 250.236 The equalization of incomes had a profound effect on traditional Inuit social hierarchy.

In traditional Inuit society, a man’s material possessions reflected his skill as a hunter and trapper and, consequently, those with the most goods earned positions of respect and status. Ferguson estimated that “only one trapper in ten” possessed the skill “to achieve this distinction.”237 Although no formal authority existed in Inuit society, the skilled trappers were

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236 Ferguson, *A Study of the effects of the DEW Line upon the Eskimo of the Western Arctic of Canada*, 38.
237 Ferguson, *A Study of the effects of the DEW Line upon the Eskimo of the Western Arctic of Canada*, 38.
seldom questioned, and, because of their successes, others attempted to emulate them. If a skilled hunter made it known that his hunting location had changed, other hunters frequently followed his example and changed their locations. The DEW Line introduced a new source of income, making it easier to obtain material goods. Thus, the exclusivity of material items decreased as hunters of varying skill levels could now afford to purchase the same goods as the most skilled hunter and trapper.

DEW Line work made no distinction between skilled and unskilled trappers. This uniformity placed casual, average, and skilled trappers in the same positions, performing the same tasks, and receiving the same pay. Community leaders “no longer [had] their status conferred through their superior performance of occupation.” In fact, young men could earn equal, or higher, incomes than their elders. Unmarried men could work continuously and save considerably more of their wages than their married counterparts. Thus, an individual’s economic success and position within society was no longer defined solely by their hunting skill.

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238 Ferguson noticed five Inuit men examining goods at the DEW Line commissary. When the best hunter of the five decided to purchase a ball-point pen, the other four proceeded to purchase ball-point pens of their own. Ferguson, *A Study of the effects of the DEW Line upon the Eskimo of the Western Arctic of Canada*, 39.

239 Ferguson estimated that “at least fifty percent of those men working for the DEW Line [had] been able to accumulate the capital needed to obtain these material goods.” Ferguson, *A Study of the effects of the DEW Line upon the Eskimo of the Western Arctic of Canada*, 38.

240 Ferguson, *A Study of the effects of the DEW Line upon the Eskimo of the Western Arctic of Canada*, 39.

241 DEW Line employment ultimately enabled men to get married younger. He took note of two young men who were able to save a considerable amount of money. Both men proceeded to quit their jobs and travel to Cambridge Bay where they both got married and decided to live on their capital. Although the men did not have the fine-tuned hunting skills that would have been required for marriage previously, their income temporarily compensated for any traditional shortcomings. Ferguson, *A Study of the effects of the DEW Line upon the Eskimo of the Western Arctic of Canada*, 39.

242 A new hierarchy emerged as a result of DEW Line employment, which balanced wage earning potential with the independence of the individual. The most highly esteemed occupations offered a high income and independence from Euro-Canadian employers. Thus, the individual with the highest status was still the highly skilled trapper who made a large income during the short trapping period, but did not engage in wage employment. In contrast, those Inuit employed in permanent wage employment occupied an “anomalous” position, because they earned high incomes and had a secure livelihood, but were dependent on non-Inuit employers. Ferguson, *The Human Ecology and Social Economic Change in the Community of Tuktoyaktuk, N.W.T.*, 58-59.
Family Roles

The effects of economic change were also felt in the family, as traditional family roles shifted. The implementation of a modern economy and DEW Line work separated women and children from the father’s daily work, and the wives [would] no longer be able to take part in the co-operative effort of finding and preparing food ... The men [would] not be able to take part in the great community seal-hunts, nor [would] the families be able to move freely to the fall fishing locations ... The adults [would] be deprived of these values and the children [would] grow up with an imperfect knowledge of them.243 Ferguson speculated that a traditional education, which depended on the combined efforts of parents and grandparents, would fail the children. In the traditional Inuit economy, each individual contributed to the survival and maintenance of the family. For example, during caribou-hunting season, in the first week of August, the elders took the young adults to the inlets by boat. The young adults then travelled inland to hunt caribou where they also prepared skins and sewed new clothes for winter. They spent their entire summer inland, creating caches of meat as they travelled, while the elders fished along the shore during the fall, spring, and summer. When the young adults returned, the elders took the skins and distributed them to the community.244 Everyone contributed to the welfare of the family and economic activity. In working alongside their parents, children learned traditional skills.

Mimicking played an important role in childhood education. Dr. Otto Schaefer committed a grave offence when he inadvertently discouraged a boy from helping his father. While stationed in Pangnirtung, Dr. Schaefer and Etuangat, his Inuit aide and guide, decided to visit the camps over the mountain along the Davis Strait. Dr. Schaefer, Etuangat, and Joapie, Etuangat’s young son, worked together to load the sled with medicine, food, warm clothes, and

243 Ferguson, A Study of the effects of the DEW Line upon the Eskimo of the Western Arctic of Canada, 45-46.
244 Wachowich et. al., Saqiyuq, 32-34.
other necessities. When Dr. Schaefer saw Joapie struggling to secure their supplies with a rope he pushed the boy out of the way to re-secure the supplies himself. Dr. Schaefer’s actions angered Etuangat who explained that the boys learned by doing as the adults did. Adults never pushed children away, or let them see if their work had to be re-done. Etuangat explained that children helped the adults better when they felt that they were needed and useful.\textsuperscript{245} Traditional childhood education depended heavily upon the presence of, and interaction with, parental figures. Wage employment removed fathers from the home and deprived children of a conventional, traditional education.

\textit{Removal of Traditional Education}

Inuit did not conform to a specific schedule when they lived off the land. Instead, they mended equipment, sleds, and clothes when required, hunted and trapped when necessary, ate when hungry, and slept when tired. DEW Line employment required adherence to a strict work schedule which removed men from their homes and redefined women’s work within the family. DEW Line construction also highlighted the lack of a modern education system in a region which faced rapid modernization. Consequently, the Canadian government introduced a formal, modern, school system. The new division between economic activity and home, combined with the introduction of formal education, created a generation of children lost in transition: some retained traditional skills, others struggled to learn them in their later years, and others gave up traditional Inuit life altogether.

While in the Western Arctic, J.D. Ferguson recorded a typical day in the lives of families involved in DEW Line labour. The men woke up between 6:00am and 6:30am each morning to have a breakfast of tea, pilot biscuits, fresh fish, seal-meat, or chocolate, before leaving for work.

The women and children continued to sleep until approximately 9:00am or 10:00am. Ferguson observed that the women and children did “little during this period except attend to each other.” Some women did a little sewing, others “jigged for cod” on the ice or casually fished in the nearby lakes and river, but most frequently, the women socialized with one another. The children played traditional group games, such as “wolf and caribou” or “blind man’s bluff,” and walked along the shores in groups of two or four. Some children visited the R.C.A.F., the Department of Transport, or the DEW Line site hoping to “invade the cookhouse, or catch a ride with one of the truck-drivers.”

The daily activity of the women and children seemed to be without any direction and [though] it [was] a highly social kind of day, it could not be described as purposeful. Because the men [had] not been hunting or trapping, there [was] little game or fur to be processed and few repairs to be made to equipment or clothing. Store clothes [were] more durable and require[d] less repair than traditional clothing.

Finally, at approximately 6:00pm, the women prepared dinner for their husbands. After dinner, the men and women visited other families or entertained guests. The men, tired from a long day’s work, did not spend the evenings working on personal tasks, such as repairing boats, motors, or hunting equipment; such activities required an entire day off from work. Men generally slept around 11:00pm, while women and children continued to socialize and play.

Wage employment detached men’s work from “the subsistence of the family – at least [in] the traditional terms,” and women and children lost their place in the family economy.

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246 Ferguson, A Study of the effects of the DEW Line upon the Eskimo of the Western Arctic of Canada, 19.
247 Ferguson, A Study of the effects of the DEW Line upon the Eskimo of the Western Arctic of Canada, 19-20.
Apphia recalled learning numerous skills from her mother during childhood, as “[y]oung girls stayed with their mothers … and our mothers would ask us to do things for them, like go and get ice or take the bucket out.” They learned how to sew and clean skins, how to make oil for the lamps, and how to chew seal skins. This, Apphia explained, was their school. Wachowich et. al, Saqiyuq, 27-28.
248 The head of the family did not provide direct subsistence, but provided the ability to subsist through employment, money, and commercial sources of food. DEW Line employment changed the Inuit economy, shifting the emphasis from subsistence-based activities to wage-based labour. Ferguson, A Study of the effects of the DEW Line upon the Eskimo of the Western Arctic of Canada, 20.
The settlement of Inuit families into larger settlements made the creation of a formal education system feasible. Initially, the DNANR attempted to provide a balanced education, being mindful of traditional Inuit cultural values and the emerging “modern” economy and society in the North. In 1953, Jacobson argued that education should not aim to make Inuit imitate “white man’s ways,” but that it should teach Inuit to improve their way of life and contribute to the overall improvement of life in the North altogether. Education should help Inuit develop an understanding and appreciation of traditional arts, folklore, and community organizations. It should develop the “capacities” of each student, enabling them to contribute to their social group and community. The education system should teach Inuit how to conserve their natural resources. It should develop improved habits in health and sanitation and improve dietary standards. Finally, education should enrich the lives of the students so “that they may lead lives that are individually satisfying and socially desirable.” In addition to promoting the persistence of traditional knowledge and culture, the new education system also aimed to prepare the children for the future Northern economy. Jacobson stated that education system should provide its students with practical experiences in vocational skills, so that the children could be economically independent within their community. Education should help Inuit children understand the main principles of their own culture and “white man’s culture.”\textsuperscript{249} Opportunities for higher education should be given to those Inuit children who demonstrated a willingness and capability to continue their studies beyond high school.\textsuperscript{250} Finally, education should enable the


children to make “wise adjustments to the advance of civilization and to maintain [their]
independence, initiative, integrity and culture in the face of the advance.” The Department did
not want to completely eradicate all traces of Inuit tradition and culture, but to balance the
promotion of traditional culture and knowledge with the teaching of relevant modern skills and
knowledge. The financial investment in Northern development during DEW Line construction
provided the department with the financial ability to expand formal childhood education.

In 1954, the Education Division began planning the construction of a school in Frobisher

offered three bursaries, valued at $1 200 each, to Inuit students. The Department hoped to provide six bursaries for the 1955-1956 school year. The government also provided ten bursaries of $600 each: five bursaries for Inuit students seeking apprenticeship training, and five bursaries for Inuit girls in training to become nurses’ aides “or for some other suitable form of employment.” The bursaries were meant to cover the lodging, tuition, textbooks, supplies, and transportation for Inuit students seeking vocational training. LAC, RG22, Indian and Northern Affairs, Series A-1-a, Volume 805, File 40-8-9, Access Code 32, Part 1, Minutes of the Fifth Meeting of the Sub-Committee on Eskimo Education, 29 October, 1954, 3.

The government recognized that residential schools were the most effective way of providing the children with “experience and education along the lines of civilization, leading to vocational training to fit them for jobs in the white man’s economy;” however, the residential school system made readjusting to traditional life difficult, in cases where the child wished to return to their “old way of life.” In addition to the difficulties a child might face readjusting to life in a traditional community, the possibility of implementing wide-scale enrolment in Northern residential schools were restrained by financial limitations. The cost of maintaining one child at a residential school in the North amounted to approximately $600 per year, in addition to a $345 tuition fee, for a total cost of $945 per pupil, per school year. LAC, RG22, Indian and Northern Affairs, Series A-1-a, Volume 805, File 40-8-9, Access Code 32, Part 1, J.V. Jacobson, “Developing a Curriculum for use in Eskimo Schools,” August 1953, 30.

The mid-1950s, government officials began expressing disapproval towards residential schools for Inuit children and expressed interest in educating the children in their own communities, amongst their families; however, due to financial constraints and a lack of qualified teachers willing to work in the North, this approach could not be implemented across the Arctic. LAC, RG22, Indian and Northern Affairs, Series A-1-a, Volume 805, File 40-8-9, Access Code 32, Part 1, F.J. G. Cunningham, Memorandum for the Deputy Minister, 30 April 1954, 1.; Additionally, the

In 1954, the Education Division began planning the construction of a school in Frobisher
Bay. They set out to overcome the language barrier between teachers, pupils, and the Inuit community at large, and commissioned a study of Inuktitut in order to standardize the written form of the language. Finally, the Department created financial incentives to encourage teachers to learn Inuktitut. Teachers who possessed knowledge of the English language and followed the basic curriculum for Inuit schools received a pay of 35¢ per pupil per day. If the teacher also had a basic knowledge of Inuktitut, the teacher received 40¢ per pupil per day. In the highest bracket, a teacher could receive 50¢ per pupil per day, if the government inspector felt that the teacher’s experience, ability to teach, and academic qualifications warranted a pay increase. The government fully committed itself to increasing access to education in the North and preparing Inuit children for the future.

The construction of the DEW Line and the modernization of the Northern economy shifted the government’s focus away from preserving Inuit cultural practices, to emphasizing the

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254 LAC, RG22, Indian and Northern Affairs, Series A-1-a, Volume 805, File 40-8-9, Access Code 32, Part 1, Minutes of the Fifth Meeting of the Sub-Committee on Eskimo Education, 29 October, 1954, 4-5. This attempt to encourage teachers to familiarize themselves with Inuit culture and language continued into the latter half of the 1950s. In 1956, the Department offered an “In-Service Training Program.” The Program was an experimental, non-credit summer school course offered at the University of Alberta. Its courses examined the cultural background of Aboriginals in the Northwest Territories and Western Canada, the problems that arose from cultural differences, and the methods teachers could use to overcome these obstacles. If the course proved successful, the Department planned to make the summer course permanent. Furthermore, teachers who had been employed for over three years would be offered the program with leave and pay and qualify for a salary increase. LAC, RG22, Indian and Northern Affairs, Series A-1-a, Volume 805, File 40-8-9, Access Code 32, Part 1, Agenda for the Seventh Meeting of the Sub-Committee on Eskimo Education, 15 March, 1956, 7.

255 At this time, the government began introducing formal teachers into hospitals caring for Inuit patients: two teachers were added to the Charles Camsell Indian Hospital staff in Edmonton; another two were added to the Parc Savard Hospital staff in Quebec City in addition to a handicrafts instructor; and a welfare teacher was added to the staff at the Anglican Hospital in Aklavik; and a welfare teacher was added to the staff at the Anglican Hospital in Moose Factory. LAC, RG22, Indian and Northern Affairs, Series A-1-a, Volume 805, File 40-8-9, Access Code 32, Part 1, Minutes of the Fourth Meeting of the Sub-Committee on Eskimo Education, 3 May, 1954, 5.; The Department continued to expand its educational infrastructure throughout the second half of the 1950s. In 1956, the Department discussed the possibility of establishing small, one-room schools at various centres in the Eastern Arctic, such as Spence Bay, Resolute Bay, Lake Harbour, Sugluk, and Clyde River. The Department decided that, wherever a sufficient local population existed, regular federal day schools should be provided. LAC, RG22, Indian and Northern Affairs, Series A-1-a, Volume 805, File 40-8-9, Access Code 32, Part 1, Agenda for the Seventh Meeting of the Sub-Committee on Eskimo Education, 15 March, 1956, 6.
skills required for employment in a wage economy. Although the government did not actively discourage Inuit culture, the new education system no longer prioritized the retention of traditional knowledge and skills. Andrew Renaud, the General Superintendent of the Indian and Eskimo Welfare Commission of the Oblates of Mary Immaculate, encapsulated the government’s concern at the spring meeting of the advisory sub-committee on Eskimo Education, in March 1956. Renaud stated that “Eskimo Education” now encompassed “the whole process now going on in the Arctic: The global impact of our civilization on Eskimo society.” The “invasion” of Southern economic activity and government interference threw traditional society out of balance. The improved health care and welfare systems in the North increased in the average Inuit life-span and the lowered rates of infant mortality, which ultimately strained the distribution of resources. The government believed that the North could no longer support the continuance of traditional Inuit life, leaving them with no alternative, but to prepare Inuit for modernization.

In 1958, the DNANR decided to use the Alberta Department of Education’s curriculum as the guide for the Northern school curriculum. The Education Division outlined four potential curricular templates for Northern teachers: English, reading, writing, speech, arithmetic, art (drawing, painting, modeling), singing, social studies, geography, bible studies, scripture, syllabics, and handicraft-making; English, arithmetic, nature studies, handicraft-making, knitting, sewing, and elementary art; Roman writing, arithmetic, hygiene, civilities, washing, manual work, and ethics; and syllabics for beginners, English writing, reading, spelling, arithmetic,

drawing, singing, geography, health, physical training, and net-making. While the new school curriculum allowed the practice of some traditional Inuit cultural practices, such as handicraft-making or net-making, each template focused on preparing Inuit children for modernization and social integration. The government hoped that Inuit children would pass the knowledge on to their own children, and so on and so forth, gradually integrating each subsequent generation more than the last. The loss of traditional education, in combination with the implementation of formal education, accelerated the process of Inuit integration and resulted in a transitional generation.

A Generation in Transition

In his 1957 report on the Western Arctic, Ferguson noted that the sixteen to twenty year olds preferred working on the DEW Line and in other wage-earning positions over pursuing the traditional life of a hunter and trapper. Although this generation had been raised in the old tradition, they had yet to reap the rewards associated with the traditional occupation. The immediate financial rewards offered by the DEW Line appealed to young Inuit men. Wage employment enabled sons to be the financial equal of their fathers. Parental discipline seemed to be disintegrating as teenagers and young adults no longer depended upon their parents for education or survival. The rift between generational values, customs, and traditions widened over the course of the 1950s.

258 By the early 1960s, the use of Inuktitut in schools was discouraged. Apphia’s son, Arvaluk, began attending school when the government opened one in Igloolik in 1961. Arvaluk came home one day and told Apphia that one of the teachers had slapped his hand, because he spoke in Inuktitut. The children were expected to speak English right away and were not allowed to speak Inuktitut. Wachowich et. al, Saqiyuq, 105-106.
259 Ferguson, A Study of the effects of the DEW Line upon the Eskimo of the Western Arctic of Canada, 23.
260 Ferguson, The Human Ecology and Social Economic Change in the Community of Tuktoyaktuk, N.W.T., 61.
Government officials told Apphia and Mathias that their sons could not travel with them on the land anymore. Instead, their sons would stay in the community all year long to attend school. Eventually, two of their sons, Simon and Arvaluk, were sent to the residential school in Churchill. Apphia recalled that she did not see her sons very often after their relocation to Churchill, and she did not receive any letters, because she and her husband were constantly travelling. Finally, they received a letter from Simon who, suffering from homesickness, begged them to speak to his teachers and bring him home. Apphia wrote back, telling him “to be patient and wait for the time to come home … he had to wait until springtime.” When Simon and Arvaluk returned to the North, however, they did not readjust to the lives their parents led. They found wage employment in the settlement and, once they started working, never returned to camp. Simon and Arvaluk gave up traditional Inuit life forever.

Despite their hesitancy to part with their children, Apphia and Mathias had little choice but to send their children to school. Having placed Simon and Arvaluk in a residential school in Churchill, and their remaining daughters in boarding schools in Igloolik and Pond Inlet, Apphia and her husband decided to keep their youngest son, Solomon, with them on the land. Mathias was determined to teach the traditional skills and knowledge to at least one of his sons and hoped Solomon could care for them in their old age. When the welfare teacher visited their camp and told Apphia that he had come to collect Solomon for school, Mathias refused to let Solomon go. The welfare teacher told them that if they did not allow Solomon to go to school, they would

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261 Wachowich et. al, Saqiyuq, 106-107.
262 Rhoda, one of Apphia’s daughter explained her father’s desire to keep Silomon with them in her interview: “I think the reason my father pulled Solomon out of school was that he had seen Simon and Arvaluk and Martha leave for Churchill, they had been there for two or three years, and he decided that he was going to teach Solomon the traditional hunting. He was determined to teach Solomon that. Maybe it was because of Solomon’s personality. Looking at my other brothers, Simon and Arvaluk, I think they’re more the administrative types, intellectual types. I think my father recognized that, so he left them there and decided that Solomon would be the one to learn to hunt. He was the youngest at that time.” Nancy Wachowich in collaboration with Rhoda Kaukjak Katsak, Saqiyuq: Stories from the Lives of Three Inuit Women (Kingston: McGill-Queen’s University Press, 1999), 170.
cease to receive their Family Allowance for Solomon. True to his word, when Solomon failed to appear in school, Apphia and Mathias stopped receiving Solomon’s portion of the Family Allowance payment. Eventually, Apphia and Mathias allowed Solomon to return to school. The only reason they allowed their other children to attend school at an earlier age, Apphia explained, was because they “were very poor at that time, and [they] couldn’t support all of them. It hurt us very much that we couldn’t get jobs and keep our children with us. I think that is the only reason why we left them in schools. We couldn’t support them by ourselves.” Some Inuit parents demonstrated a desire to send their children to school -- others gave their children up unwillingly. The challenges to the old tradition affected not just by the parents, but also the transitional generation.

Rhoda, one of Apphia’s daughters, first attended school when she was eight years old. She did not speak any English and it was the first time that she had been separated from her family. In her interview, Rhoda stated that she had never been in a day-care centre, had never been away from her parents, and had never even stayed alone with just her grandparents; she had always been right beside her mother. Rhoda struggled to learn English and adjust to the cultural differences in school. Eventually, however, Rhoda adapted to school life and even stopped dreading it. Her foster parents in the settlement, Rhoda and Joe Koonoo, treated her and her siblings well and she gained a modern education. Her lack of traditional knowledge and skills, however, plagued her in later years.

263 Wachowich et. al, Saqiyuq, 108-110.
264 Rhoda described the confusion of having a set schedule. Instead of being able to sleep and wake up as she pleased, she had to be awake and ready for school which began promptly at 9:00am. In her first year, she contracted a case of lice. At eight years old, her hair had never been cut. In the Inuit tradition, it was shameful for girls to have short hair. Thus, she took great pride in her waist length hair. When the teachers discovered she had lice, they “hacked it off” to just below her ears. She was the only one who had her hair cut at the time and felt embarrassed walking around the settlement with short hair. Ibid., 169.
In 1972, Rhoda travelled with her husband, Josh, to Grise Fiord, where they were to take a home-economics course. During their time in Grise Fiord, Rhoda and Josh stayed with Josh’s grandmother. One day, Josh’s grandmother asked Rhoda to braid a rope for a pair of kamiks. Rhoda knew how to braid three strands of wool, but she did not know how to braid four. Rhoda described the emotional turmoil she experienced as a result of her lack of knowledge:

I was scared to ask her how it was done. I was embarrassed. I was almost sixteen, I should have known how to braid four strands. I was old enough, but they had never taught us that in school. I was scared to death of asking her and I was very embarrassed ... Josh taught me how to braid four strands that winter in Grise Fiord.\textsuperscript{265}

Although Rhoda eventually learned some traditional Inuit skills, her traditional education had been delayed by years, causing feelings of confusion, embarrassment, and shame. Unlike her brothers Simon and Arvaluk, who gave up their ties to traditional Inuit life, Rhoda remained in transition; halfway between the old life and the new North.

Conclusion

In 1957, the young anthropologist J.D. Ferguson predicted that the Arctic frontier would soon close and that the Arctic would no longer be characterized by laissez-faire economics. Economic activity would shift towards individual enterprises at the expense of community solidarity and former customs and traditions would be abandoned while new ones appeared.\textsuperscript{266} Although DEW Line construction and administrative expansion significantly changed Inuit society during the latter half of the 1950s, traditional Inuit knowledge did not disappear completely. Although some Inuit willingly gave up aspects of traditional life, others chose to renegotiate a new hybrid identity. Inuit knowledge might not have been taught and learned on the land as it once had been, but some Inuit children made conscious efforts to reclaim tradition and

\textsuperscript{265} Wachowich et. al, \textit{Saqiyuq}, 183-184.

\textsuperscript{266} J.D. Ferguson, \textit{A Study of the effects of the DEW Line upon the Eskimo of the Western Arctic of Canada}, (Ottawa: Northern Research Co-Ordination Centre, Department of Northern Affairs and National Resources, April 1957), 42.
learned these skills later in life. Although the government imposed social policies on Inuit, some Inuit willingly conformed and accepted the policies while others resisted. The narrative of social change in Inuit society is neither simple nor unidirectional. Indeed, government intentions conflicted with some Inuit desires, but aligned with the aspirations of others. Over the course of the decade, children and adults alike continually renegotiated their place within Inuit society and redefined it, blending the old with the new. As Damas suggested, changes in Inuit society resulted from complex government-Inuit interactions and both parties contributed to social change.
Conclusion

The End of an Era

We were happy living on the land. We never really thought about moving to the settlement since we were barely ever hungry. My husband was a really good hunter. In later years Qallunaat started living in the community. There was a nurse, some teachers, and the Hudson’s Bay Company. The teachers had our children, they were trying to get families to live together in the settlement. Many of the Inuit were moving in. They were moving in, leaving behind their camps and their sod-houses or the cabins they grew up on...It was hard for me at first when I saw Inuit living a different way, not hunting any more...

Apphia Agalakti Awa

DEW Line construction finished in 1957, the same year that the USSR launched Sputnik, their first artificial satellite, into orbit, signaling the Soviets’ ability to send nuclear warheads to North America using intercontinental ballistic missiles. This turn of events redirected government and military attention away from the operation of the DEW Line to addressing this new threat and winning the space race. Although the DEW Line continued to operate after 1957, half of the radar stations were decommissioned in 1964. Nonetheless, the DEW Line played a significant role in Northern development and influenced the Inuit economy and society.

Although the DEW Line did not directly affect great change in Inuit health care, its construction highlighted the shortcomings in Northern health care, emphasizing the need for more health care practitioners and treatment facilities. The expansion of the health care system, however, and the effectiveness of government health policy and programs, was limited by various constraints. For example, despite government efforts to recruit more nurses, doctors, and dentists for the North, a general lack of interest on the part of health care practitioners

267 Wachowich et. al, Saqiyuq, 110.
perpetuated a shortage of human resources in the North. Dentists did not want to work in the Far North, and few nurses or doctors were willing to take up the position, leading to a situation in which the resources of northern nurses and doctors were frequently strained. Additionally, the region lacked the necessary infrastructure to accommodate an immediate expansion of the health care system. New nursing stations and hospitals were required, but the planning, shipping, and building process delayed the construction of new facilities.

By the end of the 1950s, the North still did not have an adequate number of medical staff or facilities. Additionally, the low immunity levels of the Inuit and the influx of outsiders to the region made the spread of disease nearly inevitable. Whether an outbreak began with Inuit-Qallunaat contact at a DEW Line site or after the docking of a supply ship, disease continued to threaten the health and welfare of Inuit communities. Furthermore, environmental obstacles, such as geographic location and weather phenomena, hindered the ability of doctors and nurses to travel across the region and transport patients. Poor communication systems left medical professionals isolated from their peers, forcing the nurses and doctors to redefine their roles within their communities. Government policies, such as the rations program for patients recovering in the North, were continually challenged by traditional Inuit social practices, rendering the programs less effective. Finally, despite the introduction of Western modern medicine and an increase of medical professionals in the North, Inuit healers and the use of traditional healing practices continued to flourish and persevere.

These challenges forced the government and medical professionals to adapt and redefine their roles within each community. The practice of quarantining villages effectively prevented widespread epidemics and lowered the number of casualties. In response to the need for immediate primary care and the shortage of nurses and doctors, the DNHW created the Eskimo
Medicine Chest program and implemented it at the end of the 1950s. Nurses and doctors took on additional responsibilities and redefined their roles to meet the needs of their communities. Finally, the cooperation of the entire community contributed to the successful administration of health services in the North. The cooperation and support of the RCMP officers, teachers, HBC employees, and individual Inuit allowed medical professionals to effectively carry out their duties and responsibilities and provide adequate care for their patients.

The construction of the DEW Line played a much more significant role in the expansion of Inuit vocational training programs. Though vocational training programs existed prior to the project, they were small and limited in scope. The rehabilitation programs focused on training Inuit, who could no longer hunt and trap, for wage-earning jobs. Until 1957, the Department and the FEC sent only one or two Inuit employees South for vocational training at a time, or they provided informal on-the-job training to the employee. The DEW Line, however, fueled the belief that modernization had come to the North and that a modern wage economy would soon emerge. The project and the associated expansion of administration created a relative plethora of jobs and the Inuit proved to be satisfactory and capable employees. The demand for Inuit labour continued to grow, leading the government and the FEC to predict that the need for Inuit employees would persist throughout the operational phase of the DEW Line, and in other fields of government and resource extraction work. Inuit demonstrated interest in wage employment and permanent positions as wage earners, justifying an expansion of the vocational training program.

The government designed a curriculum that provided the Inuit trainees with the technical, mechanical, and language skills required to obtain employment in a modern wage economy. Inuit were trained on the operation and maintenance of the machines present on the DEW Line
and gained a significant amount of practical experience. The vocational training program, however, attempted to achieve an unofficial secondary objective; the acculturation of Inuit in modern Canadian society. The rigid daily schedule helped Inuit adapt to having a schedule and emphasized the importance of punctuality. The importance of personal hygiene and cleanliness were emphasized, as their coworkers and employers would expect them to be clean, healthy employees. The restrictions on how and where Inuit trainees spent their time emphasized the importance of practicing good moral judgment and self-responsibility. Good press gained through good behaviour demonstrated to the general Canadian public that Inuit were ready to participate in the modern economy and to become first class citizens. Social gatherings and excursions introduced Inuit to Southern Canadian culture and industry. Finally, the Department used relief payments to dependents as a tool to teach the Inuit financial responsibility and demonstrated to the general public that Inuit were ready to contribute to Canadian society. The government used formal and informal mechanisms within the vocational training program to prepare the Inuit for the emerging modern economy, in all aspects of life, professional and social.

Lastly, the expansion of the administration and construction of the DEW Line significantly altered traditional Inuit life. The creation of semi-permanent and permanent Inuit communities enabled the government to more effectively regulate Inuit social practices, such as marriage and adoption. Additionally, the transition from the traditional Inuit economy to the new wage economy shifted the requirements of marriage from a man’s ability to provide for his family using the land to merely having wage employment. The construction of the DEW Line resulted in the increased accessibility of Inuit camps and communities and facilitated the expansion of government administration into their homeland. This enabled the government to monitor and interfere in traditional Inuit social customs and practices. Traditional marriages lost
legitimacy as “legal” marriages, conducted and approved by missionaries and other government representatives, became an expectation and requirement for any form of financial assistance or for proper salary payments. Government officials and representatives increasingly interfered in the traditional practice of adoption, frequently mischaracterizing the nature and circumstances of Inuit adoptions. In both instances, the government hoped to integrate Inuit into the greater Canadian society by bringing Inuit under the same rules and regulations as other Canadians.

DEW Line construction challenged Inuit economy, society, and culture by creating opportunities for wage employment and for activities that deviated from traditional value systems. Wage employment upset the balance within traditional hierarchies, placing increasing emphasis on financial earnings and paid, unskilled labour, as opposed to subsistence-related skills. The appeal of wage employment drew young men away from subsistence hunting and into an emerging wage economy. These economic changes contributed to the alteration of familial roles and childhood education. DEW Line construction removed men from their homes, distancing women and children from work related to the family’s subsistence. Additionally, Inuit children of wage-earning families lost opportunities to obtain traditional knowledge from their parents. The introduction of formal schools further complicated the process of obtaining a traditional education.

The DEW Line era did not last long, owing to technological change and geopolitics. “The Local Effects of Decreasing Military Interest in Northern Canada,” written in 1960, reported that the DEW Line, like previous military projects in the north, had “been built under conditions of great urgency” as a “crash program” and, while it provided short-term employment, the operational phase staff consisted of “technically trained personnel brought in from the south.” Additionally, operations ceased “abruptly, with little or no warning.” While the “loss of about 80
jobs might not appear very serious in absolute terms … it would come at a time when employment was badly needed. Expansion of activities in the north … appears to have reached a plateau, while greatly increased numbers of Eskimos have received a measure of technical training, are looking for suitable employment, and no longer have the skill or equipment to trap and hunt.”

The construction of the DEW Line, the expansion of the administration, and the implementation of a new wage economy challenged traditional Inuit life, but in the 1950s it did not abolish the old ways.

Government policies, motivations, and intentions cannot be simplified to one-dimensional explanations. Government policies certainly were shaped by paternalistic ideologies and tendencies, and there was a desire to assimilate Inuit into Canadian society. Nevertheless, external factors such as humanitarianism, financial limitations, and a lack of human resources also played significant roles in defining government objectives and in constraining government action. Furthermore, Inuit were not passive participants who simply allowed the government to impose their will. Rather, Inuit assisted and facilitated the implementation of government policies in some instances and actively resisted them in others. New practices and values were adopted, while some old traditions were retained. Ultimately, the narrative of Northern economic and social development is complex and individual experiences varied.

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Bibliography

Archival Sources

Library and Archives Canada
  Indian Affairs, RG 10
  Transport, RG 12
  Indian and Northern Affairs, RG 22
  National Defence, RG 24
  External Affairs, RG 25
  National Health and Welfare, RG 29
  Northern Affairs Program, RG 85

Primary Sources


Ferguson, J.D. *A Study of the Effects of the DEW Line Upon the Eskimo of the Western Arctic of Canada*. [Ottawa, ON]: Northern Research Co-Ordination Centre, Department of Northern Affairs and National Resources, 1957.

Ferguson, J.D. *The Human Ecology and Social and Economic Change in the Community of Tuktoyaktuk, N.W.T*. Ottawa: Northern Research Co-Ordination Centre, Department of Northern Affairs and National Resources, 1961.


Secondary Sources


