

# CORNERSTONE

The formative years of St. Vincent—Oregon's first hospital

BY ELLIS LUCIA



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The special reportorial skill of Ellis Lucia allows readers immediate entry to the rich archives and chronicles of the Sisters of Providence.

Their history is a dramatic, poignant struggle to provide health care with compassion.

In the case of St. Vincent, more than a million individuals have benefited in outpatient or inpatient circumstances over the century of service by this exemplary metropolitan hospital.

This estimable work reflects the rich source material housed in Seattle and Montreal and much deeper insights into the matrix of the Pacific Northwest development.

Thomas Vaughan  
Director  
Oregon Historical Society

While the logger was writing his history in the development of the Pacific Northwest and commerce was emerging along the Columbia, the Sisters of Providence quietly and persistently developed their hospitals among which was Oregon's first. This is the story of the formative years which led to many other firsts: nation's first school of anesthesia, region's first pathology laboratory, world's first cardiac telemetry station, Portland's first heart catheterization unit, Portland's first coronary intensive care unit in a private hospital and the Northwest's first endowed professorship in a private hospital. It is a story of a fascinating past and augurs well for carrying on truly great work.

William H. Hunt  
Chairman, Advisory Board  
St. Vincent Hospital and Medical Center

# CORNERSTONE

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CORNERSTONE  
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THE SAGA OF BEN HOLLADAY  
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TRAILS OF THE IRON HORSE



# CORNERSTONE

THE STORY OF ST. VINCENT—OREGON'S FIRST PERMANENT HOSPITAL  
ITS FORMATIVE YEARS

BY ELLIS LUCIA

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Portland, Oregon

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at Portland, Oregon

In memory of the early-day  
**SISTERS OF PROVIDENCE**  
who braved the rigors of the frontier  
Pacific Northwest to blaze many trails  
and establish institutions of lasting  
importance to their communities, states,  
and nation, and to those who carry on  
their work.





## CONTENTS

VII	Contents
IX	Introduction
XI	Acknowledgments
XIII	Foreword
17	Chapter I—Steamer Day In Portland
27	Chapter II—Beyond the Distant Mountains
35	Chapter III—‘Everybody Knows the old Mother’
45	Chapter IV—Magnificent Clutter on Block 471
53	Chapter V—Gold from the Happy Miners
67	Chapter VI—At the Edge of Slabtown
77	Chapter VII—From All-Walks of Life
87	Chapter VIII—Long Trail to a Hillside
101	Epilogue: Landmarks of Heritage
111	Bibliography
112	Appendix
118	Credits
119	About the Author

This must have been a demonstration for the benefit of medical students, shown in background. It was taken in the main surgery of the second St. Vincent Hospital. From its formative years, the hospital had close ties with faculty and students of the University of Oregon Medical School.



INTRODUCTION *By Glenn L. Jackson*  
Charter President, St. Vincent Medical Foundation

Having been a product of Oregonians who date back to 1848 I am delighted Ellis Lucia has put his talent into telling the story of the formative years of Oregon's first hospital. The Sisters of Providence, it seems to me, personify the charitable and philanthropic efforts of so many Oregonians in so many walks of life who have raised our livability quotient to the level those in many other states envy.

Through dedication, determination and tremendous expenditures of energy and imagination—in some cases with considerable physical danger—the sisters sought out those who would reward their efforts with financial and other kinds of support, keeping the doors open to patients from whatever economic, ethnic or social background.

Schools, hospitals, cultural societies, museums, music and art groups have flourished in Oregon because people believe and, believing, cared enough to share their resources. Yet today—as in some of the dark days the sisters experienced—hard times have befallen some of the once mighty institutions. Tremendous leaps forward in medical knowledge and new capabilities of surgeons have increased the potential to lengthen life-spans, but in many instances related costs have increased as the health care team has increased in numbers, knowledge and sophistication of equipment.

As the sisters' century of service at St. Vincent comes to a close and the second century begins, yet another shadow hangs over the medical care field and that is the runaway costs of malpractice insurance for physicians and hospitals. Our government officials are grappling with that one as they are with refinements in national health insurance. For years to come, development on both of those fronts is sure to continue toward an ultimate solution in the public interest if our penchant for problem-solving is to be maintained.

The story of St. Vincent Hospital and Medical Center as it serves during the last third of this century has been made possible by the sisters, to be sure, but also by the medical staff, the support per-

sonnel, volunteers and the thousands of citizens whose generosity has provided so much in facilities, equipment, research, education and comforts associated with the physical plant we know today. The need for continuing contributions in the future will be no less because as long as men and women of science toil they will be making new discoveries which have application for man's well being and longevity.



Oregon was still a territory when Portland was born amid tall timber on the bank of the Willamette River. This was how the floundering village appeared at the age of one year, in 1852, four years before the Sisters of Providence came to Fort Vancouver.





## ACKNOWLEDGMENTS

Many good people gave of their time, thoughts, ideas and efforts toward the telling of the colorful early years of St. Vincent Hospital, and I am grateful to all of them, and also for calling my attention to this unique slice of Pacific Northwest history.

Thomas J. Underriner, St. Vincent administrator, first envisioned the worthy idea of a book about the hospital, out of which this volume on the pioneer beginnings has evolved. I am most thankful to have had the opportunity to explore and become acquainted with this fresh material, and in this regard express particular thanks to a long-time friend, Mildred McGilvra, who suggested my name to J. William Tobin, public relations director for the Sisters of Providence headquarters at Seattle. And, I am indeed grateful to Mr. Tobin for possessing the tenacity to “hang in there” after making the initial contacts regarding such a project and finding me, having only recently completed an extensive book about the Northwest’s woolly timber industry, rather reluctant to make a sudden leap from loggers to Catholic nuns. Only his patience and good nature, and the encouragement of my wife Elsie helped me over the hump until I could see the full value of the material that was being opened for my use as an author in the field of Western Americana. Happily, too, I found the nuns, in their own way, just as colorful as the loggers.

Certainly, Sister Rita Bergamini, the capable archivist for the Sisters of Providence at Seattle, needs a special word for her many hours of digging through books, records and dusty archives seeking out anecdotes and facts which might be of interest, and for her many other suggestions which helped to shape the book. And surely a citation needs go to Sister Dorothy Lentz who spent many days transcribing onto cassette tapes, from French to English, early reports by the sisters to the Mother House at Montreal, Canada. Clearly the book has a special flavor thanks to her contribution.

Sister Mary Mildred, contemporary of Mother Joseph and Mother Mary Theresa, reminisced about

the early history. The Oregon Historical Society, the Multnomah County Library in Portland, the University of Oregon Medical School Library, the Seattle Public Library and the University of Washington Library all gave an assist. Two good Portland writing friends clarified some puzzling points. John Labbe explained the routes and workings of the early trolley car systems, while Miles Potter who knows the eastern Oregon mining country took time to help in this particular area. My appreciation goes, too, to the Westover Land Corporation through Ingrid Louiselle who arranged that I might prowl about the vacant site of the second St. Vincent Hospital without landing in the stoney lonesome, courtesy the security guard.

I am especially grateful to Ken Dollinger, assistant public relations director at St. Vincent, for his encouragement in the project, and his attention to my requests and problems. And also to Travis Cross, assistant administrator at the hospital, for his sincere interest.

Lastly, special thanks must go to my wife Elsie who did the final typing on the manuscript, as she always insists on doing in addition to her own busy schedule, a contribution that I appreciate since it gives her the opportunity to make worthwhile suggestions and question possible points which I might have overlooked.

ELLIS LUCIA  
Portland, Oregon  
1975

Roads were bad; Oregonians rode the river sternwheelers to get around the rugged Pacific Northwest country, for the skippers boasted they could run "anywhere it's damp".





## FOREWORD

A local disc jockey whom I know, during the turbulent youth rebellion of the late 1960s, proclaimed that “history is garbage”, and that the only important thing was this very moment. He used the term often on his evening radio talk shows, until I brought him up short by pointing out that if this were true, we were rejecting our heritage and everything on which the good things of this nation have been built. I accused him also of playing up to his youthful audience, many of whom felt that the past was really “a nothing”; and that since he flunked the required course of history in college, he probably had a personal disdain for anything branded as such. That must have been on target, for he didn’t mention it again on his shows.

Many people shy at the word “history”, for it brings to mind some boring teacher who forced them to memorize dates in grade and high school. Yet another word for history is yesterday, and what is being reported on the evening news is already a part of what has gone before. Whether the events are great or small, dramatic and earthshaking, or simple and quiet, all belong to the whole and are therefore a part of ourselves. Not understanding what has happened before means that we cannot comprehend ourselves, nor can we attempt to correct errors of the past. I suppose this is why some people actually abhor any reference to yesteryear, for unfortunately it shows how little we have progressed, how the same mistakes are made repeatedly by succeeding generations, and how things come up again as somebody’s new idea. In this very book, for example, complaints of “noise and pollution” and industrial crowding without the protection of zoning laws forced St. Vincent Hospital to abandon its original site which its founders considered an excellent one. And, the words “rapid transit” were used to describe the early intercom system installed by the hospital. Somehow, it all sounds quite familiar.

Perhaps no other place is wealthier in colorful events and characters than is our own American West, which is known and has been romanticized

around the world. At least I like to think that this is true, and feel that many thousands view it the same way. However, in the telling and retelling of the West’s exploration, settlement and development, I am often surprised by the goodly number of topics, stories and legends which have gone overlooked or been ignored by those proclaiming to be specialists in this particular arena.

The Western badman, the small town sheriff and the federal marshal have been overplayed far out of proportion to their importance to the frontier scene. In like manner the miner, the cowhand, the wagon-master, the railroader, the stagecoach operator and the saloon keeper have been focal points for fiction writers from Nate Buntline on down the line, romanticized and worshipped around the globe to a magnificent distortion; and at the expense of thousands of true accounts, many of them far more colorful, of the development of the West in its ranches, towns, cities, and systems of travel and business enterprise.

The strange part is that American authors on the West and their publishers, and more lately the media of motion pictures and television, have followed for the most part the well-worn and well-tested trails of so-called heroes, rather than looking beyond the obvious for something fresh and new by way of characters and situations. Heroes? One author spent several years digging through old records and newspapers to gather evidence on what seamy characters the gunslingers really were, among them Wyatt Earp, Doc Holliday and Wild Bill Hickok. Another book or movie on the psychopathic killer Billy the Kid holds no interest for me, nor do works about the James brothers, or on the terrors of Dodge City and Tombstone. Neither does a retelling again of the strange and questionable exploits of General George Armstrong Custer at the Little Bighorn. It would be simply batting the air—a waste of time, money, paper and ink—unless of course, some truly startling new material were unearthed.

For me, the continued excitement of Western Americana comes from uncovering the fresh, untold

and/or little-known true anecdotes and stories of significant events and personalities that have been generally overlooked. These people and events properly focus on what life was really like on the frontier, and can find significance in the turbulent scene of today. Pursuit of these offbeat stories has been described as “working the tailings”, referring to old-time mining operations whereby once the whites skimmed off the cream of a gold or silver strike and then abandoned the diggings, secondary cleanup miners, among them the Chinese, moved onto the claims and found a living and perhaps a small fortune from what was left behind. Occasionally too, they would hit another rich vein, which happened in my introduction to the Sisters of Providence of this book.

Countless rich veins still need to be brought to light by historians and storytellers to put the portrait of the West in better balance. How many worthy books have you read about the local lords of commerce, the political developments of a state or region, or the business interests which built the cities? How much has really been done for a varied audience about the pioneer woman, or the bold ladies of Wyoming who fought for women’s rights far ahead of their time? Most people have heard of Calamity Jane and Cattle Kate, but outside of Oregon, who knows about Abigail Scott Duniway? The picture of the Indians, long called savages, is only now changing, mostly on their insistence. Even the brawny logger who assuredly was a part of the Western scene, has been overshadowed by the cattleman and the cowboy because he wasn’t easily understood, being isolated in the tall and uncut, and because he was accused of ruining the environment and the land with his ax and misery whip. In reality he was no worse than the miner and his hydraulic gear, the cattleman who overgrazed, and the farmer who plowed under the soil-holding grasslands.

Another much neglected group of Westerners set up missions and churches in the settlements or crossroads, provided the spiritual strength and guidance,

established many of the first schools, and often created an oasis or shelter for people in trouble or with no place to go. They helped mold the character and establish the institutions of the communities, but how many have ever become the leading personalities of books, motion pictures or television shows? Still, their experiences were high adventure; they took the risks and bravely struggled across the plains, the tall mountains and through Indian territory to carry the word of God to the homesteaders and Indian tribes of the western frontier. Just how much of a risk they took is exemplified in the so-called massacre of Marcus Whitman, his wife and a dozen others in 1847 at his mission. But the missionary clergy, Catholic and Protestant alike, was a significant part of the West’s development, from the time of Father Junipero Serra who very early built the California missions; and was equally important in the Oregon Country where institutions and communities then established are very much alive today.

It was therefore a sheer delight to discover the story of the Sisters of Charity of Providence who arrived in the Pacific Northwest at Fort Vancouver over a century ago, and who founded so many important institutions—schools, hospitals, orphanages, care centers—throughout this vast region. Outside the Catholic community, the work and contributions of Catholic pioneers and missionaries in the Pacific Northwest generally have been downplayed, misrepresented, and often neglected. This has come about largely because much of the Oregon Country, unlike the Southwest and California, was a Protestant stronghold where Catholics were discredited and hated; and also because until recent years Catholic institutions haven’t made general historians and popular authors very aware of their archives and files, and of their accessibility. Much of the writing and the outlook have been by Catholics, with their own particular terms, phraseology and point of view which makes such works burdensome to the average reader. Now all this is changing, and it will likely bring new perspective to future ac-



countings of the Oregon story.

The saga of the Sisters of Providence in the Pacific Northwest is an exciting example of what is happening. In all my reading, I had never heard of them so far as being any group of significance to the Northwest scene. In over three decades of living in the Portland area, I have seen St. Vincent Hospital hundreds of times, as have other Portlanders, for you could hardly miss that hillside landmark. Yet it never occurred to me that its colorful beginnings are as thrilling a story of the development of Oregon as one might ever hope to find.

What was even more exciting was the wealth of raw reports, records and personal experience accounts of the Sisters of Providence from their arrival in 1856 at Fort Vancouver throughout the long struggle to develop what became Oregon's first bonafide hospital. These reports were in French, sent to the Mother House at Montreal, Canada. Since my high school and college French has been largely forgotten over the years, Sister Dorothy Lentz translated them onto cassette tapes for my use. The accounts of the sisters' first years in Portland, their dealings with local business tycoons including my old friend Ben Holladay, the begging tours to the southern Oregon and eastern Oregon-Idaho mines, the feeding of thousands during depression times, and the day by day struggle to construct and operate the first hospital give colorful first-hand descriptions of what life was like in Oregon a century ago.

These tapes, quoted directly wherever feasible, provide the skeleton for this narrative of the formative years of St. Vincent Hospital. That they are coming to light, along with other records and even amazing early photographs, at a time when the hospital is entering its second century, and also the sesquicentennial at Fort Vancouver and the nation's bicentennial, serves again to remind us of the very wealthy heritage that is ours in the West; not one of outlaws and gunslingers and dance hall girls, but of people of substance from many varied walks of life, and of many nationalities and beliefs. They built the

West's permanent foundations which make it today different from the East and the South, for with sheer bravery and stamina they were willing to withstand continual physical and emotional hardships to bring about the solid, permanent institutions that we enjoy today.

ELLIS LUCIA  
Portland, Oregon  
1975

*Beginnings are always trying, and here the devil is so enraged he frightens me . . .*

—*Mother Joseph of the Sacred Heart*

A turbulent scene of Steamer Day in the small but bustling seaport greeted the arriving Sisters of Providence in 1874 from Montreal, Canada. This is how Portland looked about that time.





Steamer Day in Portland was a gala affair. Although this unbridled community festival happened every week, little detracted from its importance. When the ship's cannon boomed, rattling the windows of the weathered, clapboard houses and scattered business buildings of what not too many years before had been called Stump Town, the shops, hotels and saloons emptied quickly as everyone rushed to the waterfront. The mail ship from San Francisco was in the river!

Shortly the dock area was in turmoil, for every footloose Portlander was on the run. The clattering hotel buses led the way, their iron-shod horses and metal-tire wheels creating an explosive roar along the narrow streets paved with rock and stone that had once served as ballast for the incoming vessels. Churning sternwheelers hovered offshore, or had their fires up in the docks, timing their departures with the mail ship, the smoke of their stacks drifting upward above the tall masts clustered along the busy waterfront like the forests that covered much of this raw Pacific Northwest country.

Quite a howling crowd was gathering on this particular midafternoon of late September, 1874 to watch the show, catch first sight of a returning friend or loved one, and hear news from the "outside", since there were both mail and newspapers aboard. Yet on this day something new had been added to the welcoming party. Standing quietly to the side, well back from the mainstream of all this uproar, was a small gathering of Catholic nuns in their long black habits, an unfamiliar sight along the wagon-rutted streets — and especially the waterfront area—of rough and tumble Portland.

That very morning Mother Joseph of the Sacred Heart, accompanied by Sister Joseph of Arimathea and Sister Praxedes had boarded the little commuter steamer at Vancouver for the run to Portland to meet the incoming *James Stephens*, bringing four of their own sisters all the way from Montreal in eastern Canada. The triangular trip down the Columbia River and then back up the Willamette

had taken several hours, but they had arrived with time to spare. Few among the runners and roustabouts noticed them standing in the shadows, and certainly their stoic appearance didn't reflect their own inner excitement. This was an important day, not only for the sisters but for Portland and all the Oregon Country, although the local citizenry didn't realize it, and perhaps never would. In the flow of local affairs, no significance could be applied to a small group of women in strange attire, waiting for a ship to come in. Besides, they were Catholics in this western town established by New England Yankees, and it hadn't been too many years since not even a priest was allowed in the territory.

In the 1870s Portland had little time nor inclination for events or people who didn't move with the tide of this rapidly growing city. It was a man's world, an expanding center of commerce, revolving around the harbor and the deep-flowing rivers at its doorstep. In the past decade, since the big gold strikes east of the Cascade Mountains and more recently, the coming of the first link of the Oregon-California railroad, the town on the west bank of the Willamette River had begun shedding its frontier image, taking on the mantle of a major West Coast seaport, second only to San Francisco. A staggering fire the year before had wiped out twenty-two blocks along the waterfront, at a loss of \$2,000,000, but the town was quick to rebuild as the debris was moved out, much of it dumped into the river to be carried downstream to the Columbia and then into the Pacific Ocean. Now only a few scars remained of the disaster which would rank as the city's worst fire of all time.

Portland needed to rebuild quickly, its business interests realized, for despite the fact that it was the major crossroads of the Pacific Northwest, its drawbacks were many. That this Oregon center of about 9,000 was identified as a seaport was something of a phenomenon, since it was a hundred miles inland across one of the world's most dangerous and hair-raising river bars, where many ships and

lives had been lost. It was also situated inconveniently up a tributary of the broad Columbia, a side stream that Lewis and Clark bypassed several times in their excursion to the Pacific, and on the return. The town might never have become more than just a small river village, like others strung along the banks down to Astoria, as competition for the river and seagoing trade was intense.

Upstream a few miles were its chief competitors: Oregon City which was the western goal of the wagon trains and also the territorial capital, and Milwaukie, site of the state's first nursery and the center for building the sternwheeler steamboats running deep into the back country of all the major rivers and streams, "anywhere it's damp", their captains boasted. There was also Fort Vancouver, Washington, on the north bank of the Columbia a few miles distant, a natural harbor for the tall masters and steam schooners without having to negotiate the tricky mouth of the Willamette. Vancouver was an old place, founded in 1824 as a major fur trading outpost of the British Hudson's Bay Company. And from the moment when Dr. John McLoughlin, the silver-haired Chief Factor, began shipping furs and the first lumber manufactured in the Pacific Northwest, the post and surrounding village had every potential of becoming a major center of Northwest trade.

But Portland had something lacking in the other river ports of call. Its Yankee business men were tough, aggressive promoters who, once they'd set their sights and made their financial investments, capitalized on long suits and shortcomings to develop Stump Town as the crossroads of the new state of Oregon over the upstart Washington Territory to the north, with sprawling, golden hinterlands to the east, and the fertile agricultural valleys of the Willamette and the Tualatin Plains to the south and west. From the day Asa L. Lovejoy and Francis W. Pettygrove tossed a coin to dignify the place with the name of either Boston or Portland rather than Stump Town, loyal developers would do

all that was necessary to make their village the center of everything moving up and down the broad rivers, with what one writer described as "grim determination".

In a well-timed drama, Captain John Couch sailed up the river to this onetime Indian campground and lustily declared that here was the natural head of deep-water navigation. Then Captain Couch settled down to make sound investments in Portland property and have a lake named for him. Local leaders fought other places as terminals for the Pacific Mail steamers. Astoria was "too far away"; St. Helens lacked good building sites; Oregon City was barricaded by the Willamette Falls and the Clackamas River; Milwaukie was "pinched between Oregon City and Portland". So it went . . .

As for Vancouver, Portlanders feared her the most of all. They envied the military post, with its sizable payroll of government wealth, and among other things, the only bonafide public hospital in the Pacific Northwest. Portland had had small so-called "hospitals" operated by local doctors, but nothing considered either substantial or lasting. Seriously ill or injured Oregonians often made the long journey to the Vancouver hospital, a fact which the city's leaders regarded as an unfortunate circumstance, for Portlanders guarded their town's reputation jealously and were most disturbed when it was found lagging behind.

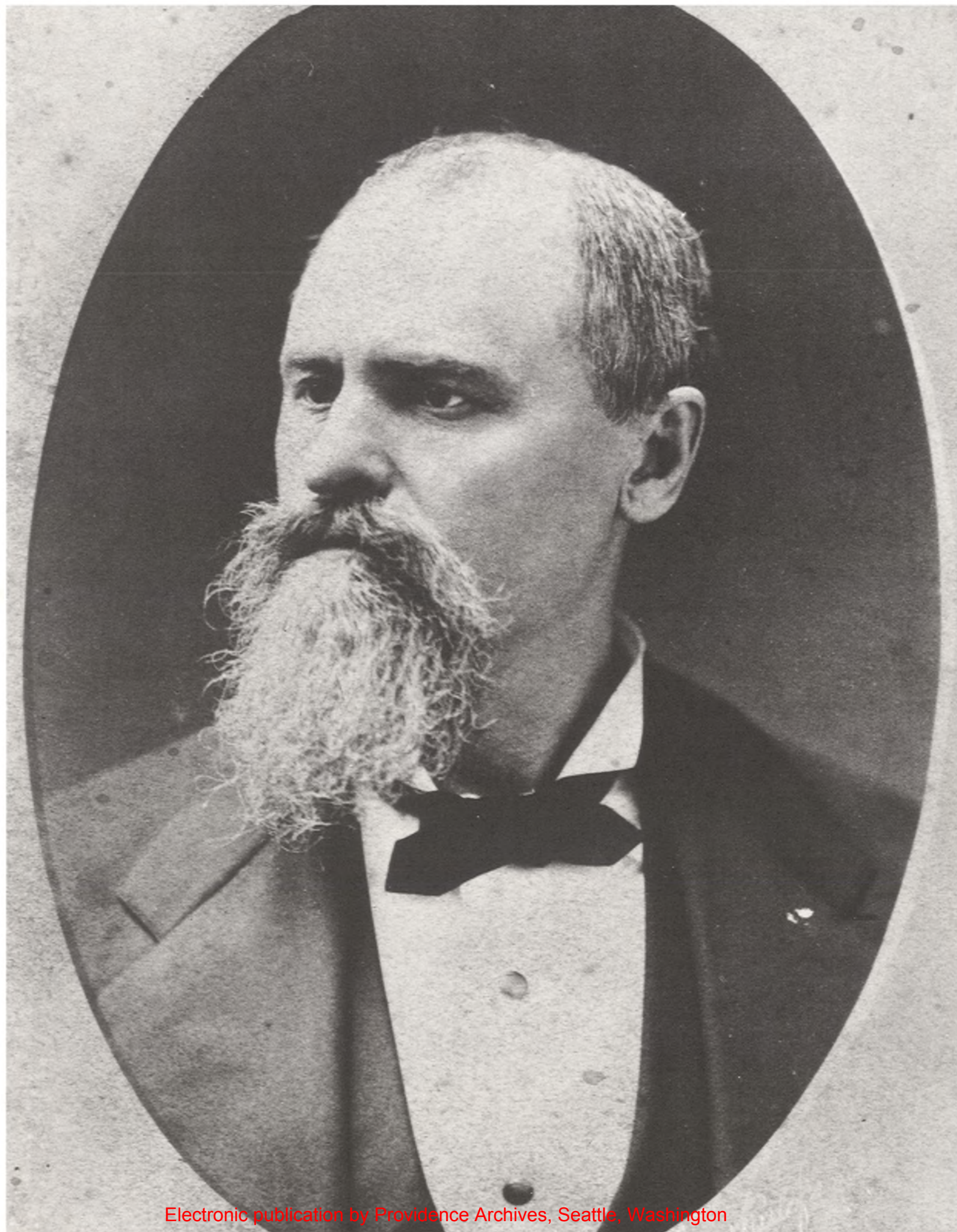
When gold was discovered in eastern Oregon and Idaho in the 1860s, Portland became the outfitting center for the diggings, and the spending place for the successful miner headed out. The waterfront dives boomed as the handsome sternwheeler fleet of Captain John Ainsworth's Oregon Steam Navigation Company reached far inland to Lewiston and even Boise, hauling hordes of miners, machinery and supplies at exorbitant rates which lined the pockets of the O.S.N. owners. Portland grew wealthy on the gold rush, on the continued operation of the eastern mines, and later on wheat, cattle and sheep. Along with all this came a mounting railroad fever.



These five Sisters of Providence from Montreal founded the first mission at Fort Vancouver, Washington, arriving in 1856. St. Vincent Hospital was an outgrowth of the region's first hospital at Vancouver. Mother Joseph is in the center. Others are, from left, top, Sister Vincent de Paul, Sister Blandine of the Holy Angels; below, Sister Praxedes of Providence, and Sister Mary of the Precious Blood.







Electronic publication by Providence Archives, Seattle, Washington



Ben Holladay, tough builder of the Oregon-California railroad, made many enemies in Portland. Developing East Portland, Holladay tried to convince Mother Joseph to locate the first hospital there. She didn't trust his motives.

Construction of the transcontinental line across the West spurred railroad interest everywhere, Oregon notwithstanding. If Portland were to keep its reputation as a world shipping center, a railroad must be built to California, originating in Portland and not somewhere down the valley. But Portland leaders had suffered their greatest defeat which would embitter them for the rest of their lives. The railroad had gone across the Willamette River, to the opposing forces mustered by Ben Holladay, the West's great transportation tycoon who operated steamers into Portland and stagecoaches to the eastern mines. In another bold stroke, Holladay was now building his own town directly opposite Portland on the east bank, which he declared in unflattering terms would "make Portland a rat hole".

Loyal Portlanders hated Old Ben who was a comparative newcomer to the state, although his ships had been running there for years while his Overland stagecoaches were still kicking up the dust of the western plains. Although Portland was now well established with its many permanent buildings of the business district, and graceful iron facades shipped 'round the Horn, plus fine residences, schools, churches, theaters and hotels, the town leaders still worried about Holladay. Thus far, his railroad went virtually nowhere except up the valley. If it ever connected across the Siskiyou Mountains with California's north-building line, his town could indeed become the key to the Northwest, and Portland proper might be considered second-rate. But for now, two years short of the nation's centennial year, Portland was all-important, and Steamer Day each week was symbolic of the city's direct contact not only with her sister port of San Francisco, but with the overland railroad and the East Coast which was the nation's heartland.

Telegraph reports had kept tab on the mail ship all the way up the river. Now she was edging carefully toward her berth. Quite a crowd had gathered to watch the docking, eyes straining to gain the glimpse of a friendly face at the rail. The sisters

moved forward for a better view. One thought she caught sight of familiar attire. Signal bells were clanging between skipper and the engine room; there was much maneuvering and shouting. At last the hawsers were thrown ashore and the vessel made secure. The gangway came down as the runners from the Clarendon, Occidental, Globe, Richmond House, Esmond and other hotels set up a bedlam.

"This way; hey...hey...right this way for the Clarendon."

"Free bus...free bus...for the St. Charles. Best in town..."

"Holton House...Holton House...Best eats in town!"

Impatient passengers, jostling their luggage, were struggling down the gangway toward the eager runners. Express men and land sharps were trying to capture the attention of the newcomers. The milling, pushing, shoving, laughter and occasional brawling kept up for a long while until the crowd began thinning out on foot, in the buses or on the little horsecar which Ben Holladay ran along First Street.

Mother Joseph and her party, joined now by Sisters of the Holy Names and a friend, John Murphy, spotted the four nuns nearing the head of the gangway—Mother Mary Theresa, Sister Peter Claver, Sister Francis Regis and Sister Denise. Shortly they were on the dock, chattering gaily in French and giving way to emotional moments while "good Mr. John Murphy" was wrestling with the luggage. For the Vancouver sisters it was a very happy time, for these were people from eastern Canada, a far distance from this lonely frontier mission to which they had given their lives, knowing that they might never see their homeland again. But for the newcomers, it was the end of a long, weary journey and a departure that had been an unhappy occasion, despite reassuring words of the Bishop of Montreal to "go, my little flock, and do not fear".

"In spite of his words," wrote Sister Peter Claver as the chronicler, "this was a sad, sad day. For us, the departure could well be a final farewell to a

great number whom we loved. Even if one day, like the young Tobias, the Angel Gabriel would bring us back to our country, time and death would have made changes.”

They had left Montreal on September 10, “thus allowing several weeks for travel” down to Omaha by train and then across the central plains where there could be delays from marauding Indian tribes and other dangers of what was still largely a lawless land. Arriving September 20 in San Francisco, the sisters headed north by sea six days later on what was an enjoyable trip for all except Sister Peter Claver who became seasick. Now they were here at last, with some immediate doubts about the entire adventure, as it had been quite an introduction to Portland with that brawling show on the waterfront.

Sometime between their arrival and departure the following afternoon for Vancouver, where the newcomers would be temporarily quartered, Mother Joseph pointed out with pride the site of the new hospital. Actually, little was there save for the partly excavated lot and the beginnings of the foundation and framework, for work was progressing far more slowly than had been anticipated. Hopes of opening the hospital this fall had been premature and extremely optimistic. Now the chances seemed faint of completing the building before spring, due largely to slowness of the workers and a lack of sufficient capital, much to the consternation of Mother Joseph who had designed and was supervising the construction. Mother Joseph, with her boundless energy and instant enthusiasm for any worthwhile project, liked to see things move ahead.

The site was located in a remote northwest corner of town, well removed from the noisy, turbulent core area and the boisterous waterfront. In fact, critics of the hospital project pointed out that they were “too far out” to be of any real use to the community. Yet they had little choice, since the land had been given them. The small band of nuns, breaking trail over the dusty, rutted streets, some of them hardly cut through, attracted stares and amused

sideglances from Portlanders who were unused to such sights. Indeed, people wondered what they were doing and where they were going, since no church or mission stood in that part of town.

Mother Joseph knew exactly where they were going; in the past two months she had been there many times. She had become very familiar with Portland in the two decades since arriving at Fort Vancouver to establish the first mission convent in the territory and to care for the sick on this far frontier from which the British were withdrawing in favor of the Americans. A year following their arrival, the Sisters of Charity of Providence\* opened the Northwest’s first permanent hospital adjacent to Fort Vancouver. They had successfully operated the growing institution ever since. Patients came from the far corners of the Oregon Country to be treated, including a continued flow from Portland and the Willamette Valley, an inconvenience that Portlanders didn’t necessarily enjoy.

As Portland developed into a major center, the need for a good hospital grew increasingly apparent. Archbishop F. N. Blanchet had long recognized the fact, as had Father J. F. Fierens, the Vicar General and priest at the Portland cathedral. So had Dr. Alfred Kinney, one of the state’s leading pioneer physicians who was forced to treat people in their homes or cramped rooming houses, and to perform surgeries on kitchen tables. As long ago as 1866, Bishop Blanchet had petitioned the Mother House at Montreal to send sisters to inaugurate and operate a hospital in Portland on a sustaining basis, since he was impressed with what the capable Sisters of Providence had accomplished across the Columbia River. Nothing came of it, for problems and conflicts of interest existed within the Catholic community itself, and the frontier urgency of the need wasn’t readily significant in far-off Montreal.

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*\*Author’s note: This was the original name of the sisters. Later, they used the shorter form, “Sisters of Providence”, which then was adopted as their official name.*

Near the corner of Eleventh and M streets, Mother Joseph pointed out the site to Mother Theresa, who would have charge of the hospital. The land, bordering on the lake named for Captain Couch, was block 471 bounded by Eleventh and Twelfth, M and N streets (Eleventh later became Twelfth street when the streets were renumbered; the cross streets were assigned the names Marshall and Northrup). The property, much of the block, was given them by the charity-minded St. Vincent de Paul Society, along with \$1,000, for construction of this much-needed hospital for Portland and all of Oregon. The site appeared a good one, spacious for their immediate needs and for expansion, looking across the lake toward the river and the distant snowy peaks. Perhaps there were drawbacks in being too far from the center of town, and in the adjacent lowlands which were likely to flood in the spring runoffs. But it seemed the Lord's will that they build here and that the Sisters of Providence be in charge under the guidance and energies of Mother Joseph, and now Mother Theresa whose job would be to keep the institution running on a sound basis.

Mother Joseph firmly believed, too, that St. Vincent himself had a hand in all of this. The letter telling of the land donation arrived at Vancouver on July 19, feast day for the patron saint of all charitable works. And amid confusion and doubt on what to do about the site, with mounting pressures for a hospital, St. Vincent had provided Mother Joseph the all-important answer on where the hospital should be located: whether it should be, like the railroad, east or west of the Willamette River.

The years of delay had been wearisome. Mother Joseph and Sister Praxedes, along with the Archbishop and Portlanders agitating for a hospital, were anxious to open such a facility "to relieve the suffering and console the sorrowing" as an integral part of the sisters' missionary work in the Oregon Country. Their ambition and enthusiasm equaled that of Bishop Blanchet. But another order, the Sisters of Mercy, had asked for this particular foun-

dation following Bishop Blanchet's request of 1866 for the Sisters of Providence. At the same time, he had written to Mother Joseph who was traveling in Canada. Nothing was accomplished; Mother Joseph and Sister Praxedes, the Mother Vicar at Vancouver, both of them longing to serve the Oregonians in this way, were not only humiliated but very distressed by this conflict with the Sisters of Mercy, since they were unable to make any solid plans for a hospital in Oregon. They must remain discreetly silent, for (as it was later told in a report to the Mother House) "the least imprudent word to the Bishop or the Vicar General could have destroyed all hope to work in the vineyard of the Lord in the diocese of Portland."

Time dragged on for several years; the outcome remained painfully uncertain. But at last Bishop Blanchet decided to break this deadlock by going ahead with the Portland project, and to involve the Sisters of Providence at Vancouver, since they were on the scene and therefore, the logical choice. Heavily in the sisters' favor was their highly successful hospital at Vancouver. Still, they had no site, although talk ran high throughout the Portland community over prospects for a hospital. The hope was that someone would step forward with a good piece of land. Someone did . . .

Ben Holladay, in a generous mood, offered Father Blanchet and Mother Joseph a fine site in East Portland where he was building his own city, plus a good house, the services of his own doctor, and funds to cover part of the construction expenses. Holladay always did things with a flourish, so that the offer would be difficult to turn down. He had reasons, recognizing that a good hospital would be a valuable addition to his growing town. In his "war" with Portland business and shipping interests, Old Ben was anxious to attract every possible variety of enterprise to East Portland, since this would draw additional settlers, increase property values, and detract from the village across the river where Holladay swore he would have grass growing on Front Street. Yet oddly, despite Holladay's prime interests on the



east bank, he maintained strong holdings on the West Side, including a fine house where he played state politics with a vengeance, the first horsecar line, and most lately, the West Side railroad into the upper Willamette Valley.

Father Fierens was ecstatic. Here was the answer to their prayers, not only in a good site but guarantee of partial financing of the project by one of the West's richest and most influential men. They could ill afford to turn down such an offer, even though the hospital would be in East Portland. The distance on the Stark Street ferry was minimal compared to going to Vancouver for treatment. That Holladay was a controversial figure on the Oregon scene didn't bother Father Fierens. He and Old Ben were close friends, for Holladay's home was right next door to the cathedral, and the priest knew of Ben's philanthropies, among them giving land for churches in other parts of the West. His religion was Catholic—a point that Old Ben stressed several times—and in the autumn of 1874, only a few weeks after arrival of the sisters from Montreal, Father Fierens would marry Holladay and Lydia Esther Campbell, young daughter of Hamilton Campbell, one of Oregon's pioneers who had been murdered by bandits while prospecting for gold in Mexico.

However, Mother Joseph had her doubts about Holladay's sincerity and good will. She knew of his rough and tumble background when operating the Overland stages, the charges against his allegedly shady business dealings, and how he had overturned the Oregon legislature with bribes, liquor and loose women. She judged, rightly, that in all affairs, he was a powerful and ruthless man who had to have his way.

Holladay tried to charm her, pointing out his own strong Catholic background. His first wife had been a devout Catholic and their children were raised in the Church. On a natural boulder along the carriage drive of their great estate called Ophir, at White Plains, New York, Ann had carved a small cross with a heart where it could be seen by the public because she "wanted people to know that Catholics live

here." On the grounds, also, a small chapel was built in Norman Gothic. Ben admitted he hadn't always been the most faithful churchgoer because he was often too busy keeping things moving on the plains and over the high seas. But along the way, he'd tried to do some good with his wealth by helping down-and-outers and even the Indians, who he felt were getting a raw deal by the overrunning of their lands by the whites.

His arguments were strong, but Mother Joseph was hesitant. She suspected that Holladay's generosity wasn't altogether altruistic, that strings might be attached, and that he was more concerned with building his town than with the sick and afflicted. But she felt trapped, for to turn down Holladay's lavish offer might incur his wrath and also that of his supporters, a goodly segment of the Portland population to whom it would make little sense to bypass such an opportunity. She would also be going against Father Fierens. The entire project might be in jeopardy. Still, Bishop Blanchet was in her corner, for he wished the hospital to be located on the West Side near the main part of town rather than gambling on that helter-skelter village across the river.

The matter weighed heavily upon her, and as she did in such situations, she resorted to prayer and penance. Still, she could reach no decision. One day while in Portland on business (she later recorded for the Mother House), Mother Joseph was passing the cathedral at Third and Stark, ironically right next door to Holladay's home. Although in a hurry, she entered to pray, for the decision about Holladay's offer was on her mind and she was about to accept it, being weary of indecision when faced with this dire need. As she knelt, a sudden impulse came to her and she dropped her precious medal of St. Vincent in the poor box.

"Good St. Vincent," she said. "You know our predicament. We will no longer worry about our hospital. Put it where you want it. It is your affair. We can do nothing more about it."

Thus, a few weeks later, as they celebrated the

Feast of St. Vincent de Paul at Vancouver, a letter arrived informing Mother Joseph and Mother Praxedes that the Portland St. Vincent de Paul Society, a charitable organization of devout Catholic men, was presenting them an excellent site for the hospital, valued at \$4,000, and \$1,000 in cash to begin the work. Ben Holladay's offer could be rejected, and Mother Joseph breathed a sigh of relief.

Mother Joseph and her sisters lost no time boarding the steamer for Portland to see for themselves. Quickly, she was making lines with a stick in the dust of summer on where the building and the out-buildings would be placed, and mentally picturing what kind of structure it would be. Soon the first excavation work was under way, and for a good many evenings Mother Joseph who was deft with hammer and saw, and knew more about construction than most women did about raising children and cleaning house, was bent over her drawing board, calculating and figuring, far into the late-summer night.



Providence Academy at Vancouver, Washington, was erected in 1873, the sisters' second building with Mother Joseph as architect. The formidable structure still stands beside the Columbia River.



Work on the new hospital building moved ahead at a snail's pace—if at all. The autumn weather, a slow work force, and the lack of funds all held back progress on the formidable building. Volunteers, although their intentions were good, couldn't be depended upon.

The original intent was to have Mother Theresa and her sisters establish the mission shortly after their arrival. But it became increasingly apparent that no portion of the building could be ready for many months. A "tiny house" in Portland was offered for their use, so that they might begin their missionary work among the poor. But in the end, Mother Joseph advised against it, since it would create additional hardships for the newcomers to this oftentimes foreboding Oregon Country, where Catholic nuns weren't always the most popular people in the community.

The sisters would instead spend the winter at the Vancouver mission, where they would have ample opportunity to observe and learn from the well-run St. Joseph Hospital which had been established nearly two decades before, in 1858, by five pioneering Sisters of Providence under the leadership of Mother Joseph. Mother Theresa and the others were overjoyed at the decision to ride out the winter there, for they had their doubts and fears about the challenges of the Oregon Country.

"Our stay in Vancouver was a real feast," wrote Sister Peter Claver. "We saw with regret the time arrive of our departure for Portland where a tiny house awaited us. We were to begin visiting the sick, as the bishop wanted us to begin our work immediately. But after a week of rest from our trip, Sister Vicar decided to open the mission only after the hospital would be completed and to keep us in Vancouver all winter. This pleased us. The winter for us was a time of rejuvenation of heart and spirit to prepare for the sacrifices ahead."

Even so, time was of the essence and the months would fly, with much work and planning to be done. Financing was a constant worry for the sisters. In

October, the first of many "begging tours" was organized for Portland and Ben Holladay's East Portland to collect money for the hospital. It would be a difficult thing, for the sisters were strangers to this roughshod seaport with its Puritan New England attitudes. The sisters were also under the handicap of a language barrier, for while they read and spoke French fluently, from their Montreal background, their English was broken and difficult to understand among cautious Portlanders who often viewed the newcomers, even though they claimed to be doing the Lord's work, with marked suspicion. Portland was used to its ethnic groups—there were German, Jewish, Scandinavian and Chinese communities—but French nuns were something new.

Then, too, many Oregonians held an antagonism toward Catholics extending from the beginnings of the Provisional Government in 1843 at Champoege when Father F. N. Blanchet and the French Canadians supported British rule and the Hudson's Bay Company over the United States. Father Blanchet had been forced into an embarrassing position by the strong ties held with the company at Fort Vancouver, but the Oregonians hadn't forgotten how he pulled out of the meetings. Still, growing Portland and Oregon certainly needed a well-operated hospital, although some of the local doctors who had small clinics or so-called hospitals talked against it as being "bad for business". The Episcopal diocese was also reportedly making plans to construct a hospital. But the sisters possessed their site and had established a reputation as capable hospital workers and administrators, able to operate a first rate institution with concern and feeling for those needing help.

Mother Mary Theresa who would be the administrator, accompanied by Mother Joseph, made the door-to-door rounds in Portland, from house to house, business to business. Meanwhile, Sister Joseph of Arimathea and Sister Peter Claver were collecting donations boldly in East Portland. The begging tour, in a way, did more than secure funds,



for it gave the sisters an opportunity to meet and talk with Portlanders, especially those of the business community. Nevertheless, their peculiar habits of dress and speech subjected them to rebuffs and painful humiliation. But they spread the word about the hospital and in this first canvassing of the city, collected \$1,688.75 which was considered a good "take" until Mother Joseph pointed out how rapidly that \$1,000 given by the St. Vincent de Paul men had diminished. Perhaps she even wondered if it might have been better to have accepted Ben Holladay's offer, for the Portland challenge was far different from Vancouver which was a closely-knit community supported by the influence of good Dr. McLoughlin and the military post.

However, not all of Portland was adamant toward the hospital. The lay men and women were hard at work. In December a public bazaar raised \$2,504, making a total of \$4,192 in the building fund. All of it went for materials and construction costs, although even this success failed to stimulate the work on the building.

Riding out the gray, bone-chilling season with its gloom and fogs and incessant rain was a dreary time for the newcomers, unused as they were to the Northwest winters and the eternal dampness. But the spirited activity of the Vancouver sisters who had long been a part of the first mission, and took this low time of year in their stride, was reassuring to the others. Periodic excursions were made to Portland to inspect what little progress was being made on the building which seemed, after plodding through the mud and water-filled ruts of the streets and walkways, farther removed than ever from the main part of town. Yet the signs of activity of this growing port, which would double its population by 1880, reassured them as to the need for a hospital here. Father Blanchet had been far from wrong in making his appeal to the Mother House for a contingent of sisters to establish such a facility.

The Portland mission was the latest in a long line of projects by the Catholic priests and nuns, going

back half a century into the Pacific Northwest wilderness. The ties of this remote, heavily-timbered region with eastern French Canada, especially Montreal and Quebec, were very strong, from the first exploration by Lewis and Clark in 1804-06 and closely followed by the Astor expedition and the overland party of William Price Hunt in 1810-11. Then the dam burst; hordes of fur trappers of British and American companies invaded the Rocky Mountains in the great years of the beaver trade. French Canadians, mostly Catholics, were among them, including the happy-go-lucky French *voyageurs* who were the most highly-skilled bateaux-men in the frontier West. They could navigate white water of the innumerable fast-running rivers and streams with a gay abandon that made them a necessary part of any expedition into the wilderness. Many of them were attached to the Hudson's Bay Company at Fort Vancouver to enhance the inland trapping expeditions which also helped secure British claims to this Northwest territory.

Eventually, these French Canadians decided they didn't wish to make trapping and boating a lifetime work. The adventure had gone out of it. The rich, rolling open country of the northern Willamette Valley, which later was called the Promised Land by wagon train pioneers, attracted them for farming and settling down with their Indian wives and children. French Prairie, as it was called, was the first part of Oregon to be homesteaded and developed for agriculture; even today many of the rural mail boxes along those country roads carry the same names as men who served in the Rocky Mountains, while the homes contain artifacts of the fur trade, such as a set of beaver traps dating to the time when only handfuls of explorers, traders and trappers wandered across the Oregon Country.

Unlike the California missions of Father Junipero Serra, who established them along that coast at regular intervals of a day's travel, the Pacific Northwest missions were more far-flung and scattered, wherever there seemed a need by Indians and whites.



Father F. N. Blanchet (center), archbishop of Oregon, worked hard over many years to establish a hospital in Portland. Along with his brother, Bishop A. M. A. Blanchet (left) of Nisqually, Washington, and Father Modeste Demers, he founded the Catholic Church in the Pacific Northwest in the 1840s.





Door-to-door soliciting and “begging tours” to other areas were ways of acquiring much-needed funds to keep the hospital operating. The sisters were often rebuffed by Oregonians who were largely Protestants.



This land was different, much more challenging. Until 1846 the Bishops of Quebec and St. Louis were considered the “Spiritual Superiors” over what was called the Oregon Country, from the Rocky Mountains and the Pacific shore to the disputed far corner around Puget Sound. The Indian tribes, notably the Flatheads and Nez Perce, showed a strong interest in the white man’s religion. They were impressed particularly by the “black robes” and had dispatched small bands of natives to St. Louis with the request for priests. In 1821 a bid had also come from the Canadians on French Prairie, but nothing could be done, since the Vicar General had all too few priests to care for the Catholic residents of the St. Louis area.

Meanwhile, Dr. McLoughlin who remained on friendly terms with his former employees on French Prairie was aware of the problem and the anxiety of the people there to have a priest and a church, what with their growing young families. He promised to do all he could to secure a priest through Hudson’s Bay’s Canadian connections. The French Prairie people sent two petitions to the nearest bishop at Red River of the North. But Bishop J. N. Provencher of Juliopolis replied to McLoughlin in June 1835:

“My intention is to do all I can to grant them their request as soon as possible. I have no priest disposable at Red River, but I am going this year to Europe, and I will endeavor to procure those free people and the Indians afterwards, the means of knowing God.”

In a second letter to “all families settled in the Willamette Valley and other Catholics beyond the Rocky Mountains”, Bishop Provencher advised:

“My intention is not to procure the knowledge of God to you and your children only, but also to the numerous Indian tribes among which you live.”

Mentioning his travels in Canada and Europe where, if he succeeded, “I will soon send you some help”, the bishop warned that the settlement would have to be patient.

“I exhort you meanwhile to deserve, by a good

behavior, that God may bless my undertaking,” he advised. “Raise your children the best way you can. Teach them what you know of religion. But remember, my dear brothers, that the proper means of procuring to your children and your wives some notion of God and the religion you profess, is to give them good example, by a life moderate and exempt from the great disorders which exist among the Christians beyond the mountains.”

The boundary situation in the Oregon Country had been touchy for years between the British and the Americans who were now filtering into the territory in growing numbers. Those French Canadians south of the Columbia, with their sympathies toward the Hudson’s Bay Company and Dr. McLoughlin were placing British interests in a precarious position. Governor George Simpson, who along with McLoughlin wielded powerful influence over the territory, agreed with the company committee in London that it would be bad policy at this time to bring a priest or two to the Northwest since “the sovereignty of that country is still undecided”, meaning the region below the Columbia River. However, it was decided that a mission could be established to the north on the Cowlitz River. Governor Simpson wrote the Archbishop of Quebec that if two priests were ready at Lechine, near Montreal, about April 25, they would be given passage to Oregon, since Hudson’s Bay *voyageurs* would then be making their annual canoe trek of 1838 with goods destined for the post at Fort Vancouver and the Willamette Valley.

Immediately, Father Francis Norbert Blanchet was given charge of the Oregon mission, with the Rev. Modeste Demers, a young priest at the mission of the Red River of the North, as his assistant. The selection of Father Blanchet, from a prominent family, was considered a wise one since in the past he had distinguished himself with a demonstration of courage and strength as a priest in the diocese of Montreal during the horrifying cholera epidemic of 1832. That same strength would be required during



Mother Joseph of the Sacred Heart, who came to Fort Vancouver in 1856 to establish a mission, was the driving force behind the building of St. Vincent Hospital. She was the architect, and also supervised the construction.

the often dangerous seven-months' trip to Oregon, a distance of 5,000 miles through a challenging wilderness. Even in the company of trail-hardened professional *voyageurs*, the going would be tough and risky by canoe, light barge, horseback for nine days across the Rocky Mountains, and then at the most northern Big Bend of the Columbia, returning to light boats for the final race for "home".

Tragedy struck when the party was hardly under way on this final lap of the journey. As one of the boats was being brought to shore near some white rapids, an English botanist and his wife, in their excitement, tried leaping ashore. The boat capsized, drowning twelve of the sixteen in the craft, including the pair who had caused the accident. The nerve-shattering disaster delayed the expedition eighteen days at the outpost above Arrow Lakes.

Word of the mishap spread downriver ahead of the party, causing anxious moments at Fort Vancouver and on French Prairie, where the settlers were eagerly awaiting the services of a priest. Following rest stops at Fort Colville, Fort Okanogan and Fort Walla Walla, the travelers floated down the great River of the West and at long last the thrilled missionaries, who had attracted much attention from the Indians by their cassocks, were now setting foot on the soil of the Oregon Country. The turbulent water at Celilo Falls and The Dalles gave the party a harrowing time, the upriver tragedy still all too recent, but on November 19 the fleet hove into view, paddling furiously, and setting off wild excitement at the Vancouver stockade.

James Douglas, acting as governor since McLoughlin was traveling in Canada and England, personally conducted the missionaries to their quarters at the fort and assigned a servant, exhibiting his own happiness that their lives had been spared on the upper river. And Dr. McLoughlin who recognized the importance of this event had characteristically prepared for their arrival by establishing a second school in addition to the English school for children of the fort's officials, where prayers and canticles

could be taught in French to the Catholic women and children. This second school became the foundation for the missionary work of the priests in the Pacific Northwest.

Three former trappers from French Prairie were also at the fort to welcome the priests. A larger delegation, hearing that priests were coming at long last to Oregon, had traveled from their valley community, but with the many delays, most of them had been forced to return home. Joseph Gervais, Stephen Lucier and Pierre Beleque had remained; now they could head home with the good news, although it was disappointing to learn that no missionary settlement could be established in their area, because of the terms to which they had agreed with the Hudson's Bay Company. Nevertheless, there would at least be a priest in the vicinity.

The Catholic mission was established on the Cowlitz, in accordance with the agreement, and occasionally services were conducted at French Prairie in a little church built by the people themselves. Before a year was gone, and McLoughlin returned, word arrived that Hudson's Bay had no further objections to a Catholic establishment in the Willamette Valley. Father Blanchet then took up residence at the French Prairie mission.

Despite the miles and months of raw wilderness that lay between, the ties had been firmly established between Montreal and the Oregon Country, with Fort Vancouver as the western anchor point, eventually recognized as the "cradle of Catholicism in the Pacific Northwest". From this place would spring churches, parochial schools, Indian missions, farms, charity centers for the poverty stricken and indigent of this raw land, and fine hospitals throughout the Pacific Northwest, from Alaska to southern California. And at the Mother House of the Sisters of Providence, talk about the Oregon Country ran high and many of the young nuns, among them Sister Joseph of the Sacred Heart, dreamed of missionary service a world away, in the land beyond the distant mountains.







Rugged begging tours were made to the mining camps and diggings of eastern Oregon, Idaho and Montana where the nuns collected thousands of dollars in nuggets, dust and coin. Mother Joseph pioneered this annual trek. Indians are guiding these nuns through the mining country. Although unidentified, that could well be Mother Joseph on the right.





Once when Mother Joseph of the Sacred Heart was supervising a building project, as was her common practice, she ordered a brick chimney constructed from a solid base on the ground. That evening when making her inspection of the day's work, she found, to her disgust, that the masons had set the chimney base on the flooring.

Muttering some little prayer, which was her style as she moved about, Mother Joseph rolled up her sleeves and the bricks came tumbling down. She labored throughout the night. Next morning when the itinerant workmen returned, they found the chimney had been completely relaid—and a top-notch job, too—but this time firmly on the ground.

When it came to anything dealing with construction or the upkeep of existing buildings, Mother Joseph was a perfectionist. Nothing from a loose door hinge to a sticky cabinet drawer escaped her eye, and most important, she did something about it at once. Carpenter, creative architect, engineer, artist, wood carver, general handyman (or handy-person they're called today)—Mother Joseph was a jack of all trades and a master of many, from carding wool and developing fine chapel altars to dickering over the price of a load of lumber. She helped tame the raw Oregon Country and establish some of its leading institutions with a plucky pioneer spirit that ranks with Sacajawea, Marie Dorion, Sarah Winnemucca, and Abigail Scott Duniway. Mother Joseph was the driving force that moved St. Vincent Hospital and the many other projects of the Sisters of Providence in the Pacific Northwest and along the West Coast; and in this current age of Women's Liberation, she stands out as one of the early trailblazers who challenged this frontier world of men and was able to hold her own, without resorting to blazing sixguns like Belle Starr or Calamity Jane or to disguises as did stage driver Charlie Parkhurst. Neither did Mother Joseph use her nun's habit to retreat behind her religion. Men feared her, but they also respected her, and thus she became a legend in her own time.

When an eastern Oregon rancher donated a cow to one of the countless benefit bazaars staged by the sisters and their lay supporters, he was uncertain how it should be marked for shipment by steamboat from The Dalles to Vancouver.

"Put a tag around her horn, *For Mother Joseph*," directed the dock hand. "She'll get it. Everybody knows the old Mother."

By the time Mother Mary Theresa arrived, two decades later than the first sisters came to Vancouver, Mother Joseph had conquered a good part of the Pacific Northwest territory with her boundless energy, even making successful begging tours to the wild and dangerous mining country of eastern Oregon and Idaho. In her latest effort, burning the lamps of her quarters at Vancouver throughout many a night, she drew up the construction plans for the first Oregon hospital, put excavators and builders to work, and had things well under way before Mother Theresa got off the ship. Mother Joseph was a woman of action; seldom was she idle.

Mother Theresa might well have been overshadowed and dominated by Mother Joseph, but that she, too, was a person of rare strength, ability, wisdom and individualism. The two nuns offset each other nicely in what was a fortunate combination for the floundering new hospital, which would face many setbacks and crises during the first two decades of its existence. Certainly other sisters, among them Mother Praxedes and Sister Joseph of Arimathea, put in long hours and taxed their energies to their fullest limits to keep the hospital going, but in the end the crucial decision-making had to be done by Mother Theresa and Mother Joseph; and it is to their credit that the Portland hospital and eventually the many others were placed on solid foundations from the very beginning. That women could build and successfully operate such hospitals was an achievement of the age, which did great damage to stalwart male egos.

While Mother Joseph's long suit was construction and working with wood, Mother Theresa's skills

were in the areas of administration, finances, and the operation of a going institution. She knew little about the soundness of construction, the plans and specifications, let alone how to design a hospital building. But the success or failure of the Portland institution—and there were many bets placed in the local saloons and counting houses that it would be a failure—might well come about from the ability to make the proper decision at the proper moment by Mother Theresa. During a financial crisis, she was able, for example, to put off the money lender who threatened to foreclose on the place, through prayer and her own personal strength of character; and it was she who, after only a few years, concluded that the first hospital could never develop properly in its location on Twelfth Street. Then, with vision and withstanding much criticism, she purchased boldly a large piece of hillside land to the west which eventually became a formidable Portland landmark.

Although green to hospital operation when she arrived, Mother Theresa was far from inexperienced at running a charitable institution. A native of Germany, she came with her parents to Montreal to escape religious restrictions and persecution in their homeland which was a stronghold of Lutheranism. At age 18 she entered the community of the Sisters of Providence which had been founded in 1843 by the wealthy widow of a Montreal citizen, Jean Baptist Gamelin, and who later took the vows herself, becoming Mother Gamelin and thereby setting the tone of the many good works by the Sisters of Providence, especially among the poor and indigent.

Sister Theresa, not long after her religious profession, was sent to St. Joseph's orphanage and hospital at Burlington, Vermont. The experience gained there later proved invaluable in establishing St. Vincent Hospital in Oregon, a world away. During the next two decades Sister Theresa worked in various capacities at the orphanage. She ranged the length and breadth of Vermont on "begging tours", seeking donations to keep the orphanage operating. While today's charities often solicit by mail, with

handsome brochures and even small gifts, face-to-face, door-to-door calls formed the pattern for collections at that time. Often the nuns suffered abuse and embarrassment in making these calls. Then for fifteen years Mother Theresa served as a department supervisor, followed by two years as Mother Superior, watching over the physical and spiritual needs of her young charges, and exhibiting a deep feeling of kindness and understanding of lonely, abandoned youngsters which they remembered all their lives. Hers was a true mother love, it was later said of her, which was shown in her compassion and her feeling that "no task (was) too hard, no duty too repugnant for her to perform in their behalf".

Mother Theresa might have stayed at Burlington throughout her lifetime service, but word had come that someone was needed to take charge of running a new hospital in far-off Oregon. It would be no easy task, for Portland was remote, with an outspoken pioneer approach to things, and it was also a Protestant stronghold, with much opposition to Catholic endeavors. A brave, well-balanced, cool person who knew all about administration and could deal fairly and firmly with people from many walks of life was desired. The Mother House Superiors at Montreal could find nobody better qualified, through her efficient service in Vermont, than Mother Theresa.

So here she was, in her late thirties, in the far corner of the country, beginning a new life and faced with a new challenge to all her abilities in a roughshod town of over 9,000. She must operate a sizable hospital without funds for even meeting day-by-day expenses, and be confronted as a stranger in the community with all the pain and frustration of trying to get the unfinished building completed so that they might begin caring for the suffering people who were already hovering at their very doorstep.

Mother Theresa was perhaps very grateful that she had Mother Joseph on the scene as superintendent of construction. The boldness and energy of Mother Joseph's dynamic personality, plus her know-how unmatched by any other woman in the



land, set her well apart from the average sister who was willing to labor with a scrub brush but couldn't hammer a nail straight. Portlanders must have wondered why Mother Joseph didn't take over the hospital administration. The Mother House had far greater plans for her, as provincial superior for the Northwest Province, and for planning and supervising the construction of many other hospitals, schools, chapels, and care centers throughout the region. The Sisters of Providence wished to make the fullest use of the abilities of this special woman who could save them much in construction costs of hiring architects and supervisors for their projects.

Working with tools was second nature to her; she recognized her talent with wood as God-given, as some people are gifted in music or writing, and that she should make full use of this ability in furthering the good works of the Lord. When a toddler in Montreal, she had played with wood. Her father, Joseph Pariseau, was a successfully wealthy carriage maker, and also an architectural designer and artist of wood. Woodworking tools were her childhood toys, her father's shops became her playrooms, and from him she, more than any of the other children, inherited the interest in wood. One day this would become of unlimited value in the Oregon Country where she would ultimately discover the versatility of the Douglas fir which emerged as her favorite of all woods.

By the time she was 12, Esther Pariseau knew the name and use of every tool in her father's shop. He allowed her to replace his tools for him in their proper locations, the mark of a careful craftsman. He taught her the correct way to hold a hammer for the best results, the uses and characteristics of all the tools, how to develop plans, and the intricacies of construction. Without her practical knowledge, unusual for her generation and many others to follow, the Pacific Northwest would have been less enriched in its emergence from the frontier age.

The most symbolic portrait of Mother Joseph would show her striding across the grounds near

Fort Vancouver, hammer dangling from her belt like the sheriffs of the Old West carried their six-guns, and wielding a saw in her hand. Tall, broad shouldered, with mannish features, she possessed the physical strength of the men around the fort. Mother Joseph was unafraid to tackle any kind of project and to deal with male workers on their own terms and with equal vitality. Had she not worn a Catholic habit, she probably would never have made the grade in construction which was considered man's work, along with logging, sawmilling and shipping. But they were forced to accept her, like it or not, for her understanding was shrewd and calculating when it came to putting things together, reading plans and specifications, and knowing the worth of building materials. She had the additional strength of her faith in prayer, which many of them couldn't comprehend. She rejected shortcut methods out of hand, and could spot sloppy workmanship in the flash of an eye. She had an unerring judgment in the choice of materials, and she knew how to check brick, lumber, nails, lime and measurements.

Certainly there was no stranger sight for the soldier or average citizen around Fort Vancouver than finding Mother Joseph in her black habit bouncing on a high crossbeam to test its strength, ripping up flooring to see what had happened underneath, or wriggling out from beneath the ground level where she'd been inspecting a foundation. She could also be found balancing precariously on a high ladder, yanking at the construction to see that everything was as solid as it should be. Her buildings were not only functional, but stout, well-designed structures that would last for many years, foremost among them being the early permanent hospitals of the Pacific Northwest of which St. Joseph's in Vancouver, Washington, was the first and St. Vincent in Portland the second. When at long last in the 1930's, the original Portland hospital was torn down, decades after it ceased to be used as a hospital, workers found that the old frame building was so well built that crowbars and much muscle power



were needed to rip apart the walls and studding.

That Mother Joseph could serve as both architect and construction superintendent was a unique condition for the Sisters of Providence. The gathering of donations and dependence on volunteer labor were always uncertain tasks, and this was especially true for the Roman Catholic sisters. Their French language was an additional barrier; Mother Joseph spoke English haltingly, making it difficult in dealing with the English-speaking community, unless one of the American sisters were along. She found it extremely trying, especially in her early years in the Oregon Country, to master what she considered a “barbarous tongue” compared to the beautiful rolling tones of her native language. She could make herself understood and that was about all, although Sister Blandine had a natural aptitude for English. As for Sister Mary of the Precious Blood, it was her native language. Mother Mary Theresa also didn’t find this much of a handicap, having worked for many years in the States.

But such matters didn’t bother Mother Joseph as they did some of the inexperienced, shy, younger sisters. She recognized her own shortcomings and was able to cope with them. Her coarse, heavy features, her sturdy build and her brusque mannerisms went against her in dealings with people. She could never charm a man into donating to her causes and she admired—perhaps even envied—the younger, pretty sisters who found it easy through their personalities and warm smiles to extract sizable donations from workers and businessmen alike. Realizing this, she often took the younger sisters, especially those of Irish descent, with her on begging tours to the mines, where their blarney could charm the men from their gold.

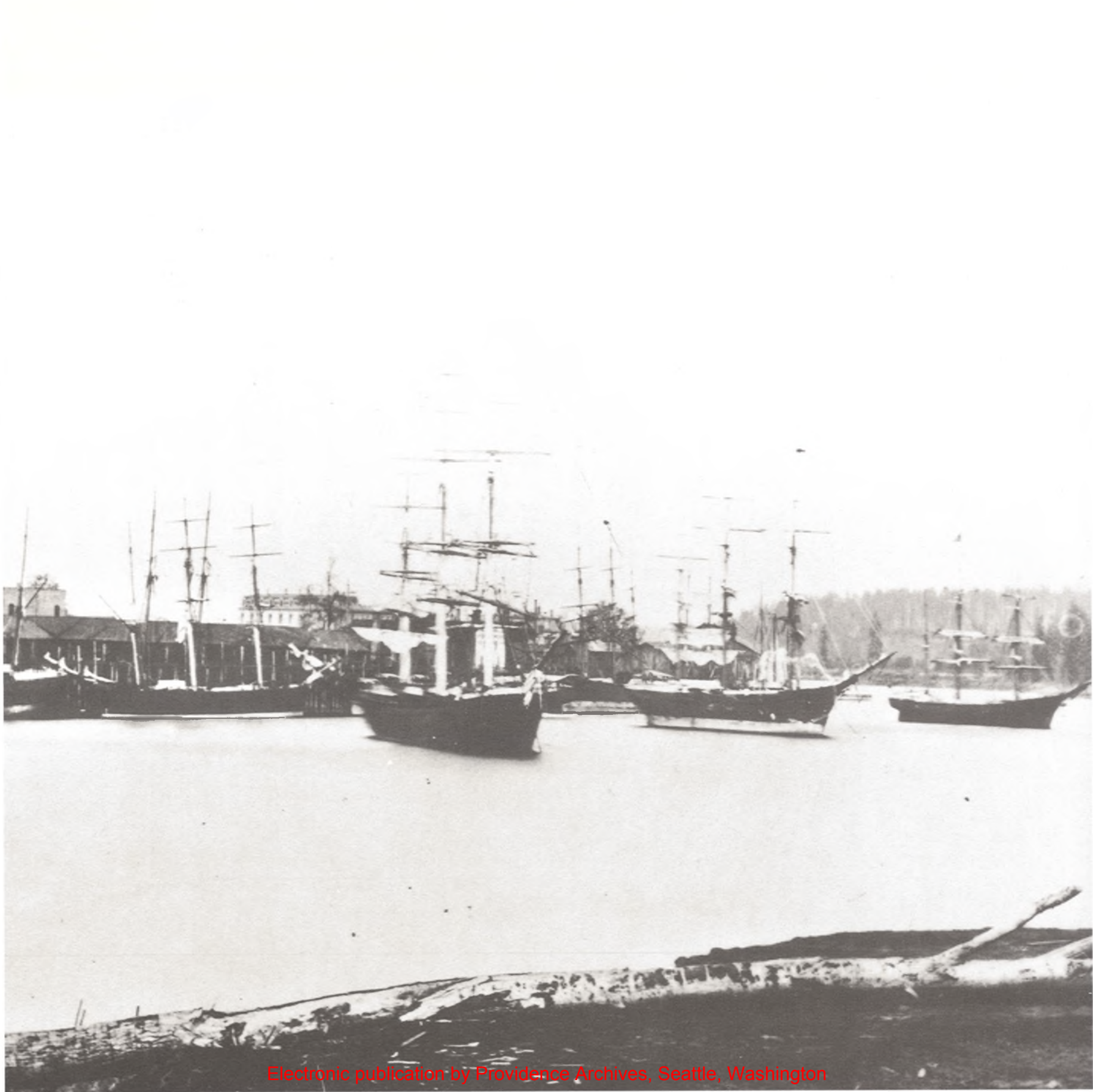
Mother Joseph had always wanted to come to Oregon. The country seemed to be calling to her while still at the Mother House in Montreal. When Father Blanchet returned after several years there, she heard more about it and grew increasingly excited. Attempts had been made prior to the arrival

of Mother Joseph and four other sisters in 1856 to send nuns from Montreal to that undeveloped far frontier. One group of Sisters of Providence spanned the long distance, including a harrowing trip across Panama and up the West Coast and climaxed by a frightening time crossing the chaotic Columbia River bar, to arrive ill, bone-weary and penniless not at Vancouver but at Oregon City, where they were taken in by the Notre Dame de Namur sisters. Flood waters kept them from reaching Fort Vancouver at all; and the Oregon Country was in disarray, with most everyone having seemingly abandoned homes and plows for the California gold fields, and nobody having made any arrangements for the nuns.

Disheartened, discouraged and terrified by this raw country, the Sisters of Providence and those of Notre Dame summoned their courage, and boarded another outbound ship for San Francisco. Having had their fill of Panama, the Montreal sisters planned this time to return via Cape Horn. Upon reaching Valparaiso, Chile, the Sisters of Providence established a mission foundation which still exists, where the mother of the celebrated Klondike Kate Rockwell years later placed her wild daughter in hopes that the convent would tame her. And the difficulties of developing Pacific Northwest missions were further underscored by the Sisters of Notre Dame who had come to St. Paul, Oregon, only to abandon that project for California, because the gold rush had drained Oregon of a large portion of its population.

Still, the bustling port of Fort Vancouver appeared ideal for missionary work because of its central location, the surrounding community, and the French Canadians, although now the American military was taking over the Hudson’s Bay post. However, once again things were in confusion. Bishop A. M. A. Blanchet of Nisqually, brother of Father F. N. Blanchet, had made the request for the nuns. But he was away in Europe. No preparations had been made to receive Mother Joseph and the four other sisters in this December climate, the low time of the year when

The Portland waterfront was a forest of tall masts, emerging from the frontier, when the Sisters of Providence landed to build the inland seaport's first bonafide hospital.





Oregon became the "Valentine State" by gaining statehood on February 14, 1859. But Portland celebrated a year earlier when a false report told of being admitted to the Union.





the cold winds off the Cascade Mountains funneled down the Columbia, forming frost and ice at the river's edge.

Bishop Blanchet left orders for construction of proper quarters and a schoolhouse. But Abbé J. B. Brouillet, the vicar general, concluded on his own that Olympia which was the new Washington territorial capital would be a far better site for a school, since that particular area seemed to be growing more rapidly. Therefore, he delayed construction of facilities at Vancouver. Unlike today, when things can be clarified by merely picking up the telephone, it was impossible to contact the abbé's superior. Mail arrived only twice yearly through the Hudson's Bay Company.

The nuns' first quarters were enough to discourage them: an unfinished, airless attic room, 10 x 16 feet, and filled with clutter which had been acquired by Bishop Blanchet on begging tours. The only other choice was a shed through which the winter winds whistled their violence. The welcome was further disrupted by the bishop's return, and sharp words between him and the abbé—an additional embarrassment for the sisters.

Soon Mother Joseph was wielding hammer and saw with her great skill to make the place more habitable. A letdown table was hinged to the wall and boxes became shelves for dishes and personal belongings, including Sister Blandine's accordian. In good spirit, the sisters, with the love of cleanliness and orderliness common to French Canadian women, attacked the clutter from broken furniture to old blankets used by both whites and Indians during troubled times with the natives. They were determined to make the place livable until their own little house was available.

By February a small 16 x 24 foot structure was completed, with the sisters living in the attic quarters. But their feelings were far different about this building, for it was a place of their own where they could truly carry forward their missionary work. In the interim they had been making a start by visiting

the sick and impoverished of the Vancouver community, both Caucasian and Indian, Protestant or non-believers as well as Catholics, for this was their creed as Sisters of Providence, even though they themselves were very poor. The dreary Northwest winter did nothing for the sisters' morale. They were used to the cold of Montreal, but longed for sunny blue skies. On this raw frontier, with no mail nor other contact and the feeling that they were a world away, the sisters grew homesick and depressed. Mother Joseph had difficulty keeping up their spirits, and could readily understand why the first band of sisters had fled the country shortly after arriving. The primitive conditions, the low morale of her charges, the setbacks and physical and mental suffering were reflected in her letters to Mother Emelie Caron, the Superior General at Montreal, although she tried to hide them.

"Beginnings are always trying," she observed, "and here the devil is so enraged he frightens me."

The sisters were kept busy developing a small chapel and refurbishing an unfinished church which was an old Hudson's Bay fur storage building, later turned into a barn. They were also laying plans for a school. Gradually they saw progress, but supplies were difficult to obtain, or nonexistent. Mother Joseph found herself more often with pen in hand than saw and hammer, writing the Mother House for urgently-needed things, even though these wouldn't arrive for many months.

"I beg you, dear Mother," she told Mother Caron, "to send us a spindle, a flange and some wire. I shall try to make a spinning wheel. It is hard to get wool stockings here, but we get all the wool we use at low cost. With a spinning wheel we can reduce expenses."

Through prayer and the knowledge that they were engaged in God's work, the sisters somehow made it through the winter. In the spring one of the first schools in the region was opened with seven small girls comprising the initial student body. Orphan children were brought to them, the first three-year-old Emily Lake who acquired the distinction of be-



ing the first pupil of a Catholic school in the Pacific Northwest. Soon a tiny boy, little more than an infant, was thrust into their arms by a pleading mother who couldn't care for him. In these early years, the school accepted many orphan children of all or mixed races, in addition to those of local Catholics who wished to have their offspring educated there rather than in the "English school". Even Dr. McLoughlin would visit them weekly, sometimes joining in the singing. There was always room for any orphan child, of which there were many in this era of the wagon trains, due to the hardship of crossing the plains. The need became so critical that it resulted finally in the establishment of an independent Children's Home in Portland by the wagon train people themselves.

A cluster of small buildings surrounded by a white picket fence gradually developed where the sisters were putting down their roots, and became known as the "Providence enclosure" and the "Providence suburb". Mother Joseph's woodworking tools which she'd acquired with the first money given her by the vicar were already showing signs of wear, for she was unyielding in her goal to establish a self-sufficient community within the larger one of Vancouver. Six small cabins were in use by June to house two orphans, two boarding students, ten day students and three elderly townspeople. The young sisters—and they were very young—were also nursing the sick in their homes, managing the Bishop's house and church, and caring for displaced Indian children from the Yakima wars.

Still, talk of a hospital was minimal, although Mother Joseph must have early recognized the great need for one. But in 1857 an elderly man, stating that he was age 85, appeared at the sisters' door, penniless and unable to care for himself. While there seemed no room for him in the crowded convent school building, Mother Joseph and Sister Praxedes couldn't turn him away. Old age, they knew, demanded so very little . . . A place was made for him to sleep near the stove, giving him the security and

companionship he needed in these twilight days. It also set the pattern for another important branch of the work the sisters were beginning in the Pacific Northwest.

More and more, it seemed, the people of Vancouver looked to the sisters in time of illness and desperation, for they found hope, gentle understanding, security and peace of mind in the nuns' good works and their simple, yet oftentimes effective remedies. The language barrier seemed most unimportant at such times. One young man, John Lloyd, was visited often by the sisters, for he was dying slowly of tuberculosis. The heart of the entire community went out to him, yet no place existed where Lloyd could receive adequate care and be made comfortable, having no home of his own. As a charity case, he was the responsibility of one, then another of the local citizenry, yet nobody wished with his disease to accept him into their homes. Would the sisters take him in? That wasn't the point; where would they put him?

While walking from town one day in 1857, Abbé Brouillet found a small coin lying in the dust. He turned it over to Mother Joseph.

"Here," he declared, "is the first donation to the hospital."

Mother Joseph was startled by the abbé's directness to a subject that had long been on her mind, and also by the fact that ironically the first donation should come from the vicar who had given them such a turbulent beginning in Vancouver. But the nuns alone couldn't take on such a project without solid assistance. A hospital was far different from operating a school or an orphanage. Abbé Brouillet began prodding the women of Vancouver to form an organization supporting such an undertaking. His efforts paid off; on April 6, 1858 the first meeting was held for the Vancouver Ladies of Charity comprised surprisingly of women of Catholic, Methodist, Episcopalian and Jewish faiths, with sixteen attending and thirteen others submitting their names for membership.

The need for a hospital was critical, they all

agreed, but where could it be opened in this crowded frontier river community? And what about financing? Such a project would be costly, with lumber at \$40 a thousand board feet and the working man asking \$8.00 a day for labor. Eyes turned to Mother Joseph who shifted uncomfortably in her chair. What about that place she was presently building? Mother Joseph had been putting the last touches on another small segment of her community for a bakery and laundry. Well, if it could be used, she would turn it over to the project.

The Ladies of Charity promised to handle the finishing and furnishing of the two-story building. They chose to call it St. Joseph Hospital and then elected a leading Protestant woman, Mrs. William Rodgers, first president because she was a person of influence with a wide circle of friends who could be interested in the day-by-day functioning of the hospital, since the sisters' numbers were so limited. The Ladies of Charity agreed that the sisters couldn't handle it all, and on that high note the meeting adjourned in what was a rare day for tolerance and tact seldom found on the sparse Northwest frontier in this time shortly before the Civil War.

Once again Mother Joseph was back at her drawing board, making alterations on her latest building. Her ideas for a bakery and laundry were set aside for now. Before long, the tiny unpretentious hospital with four beds and an equal number of chairs and tables was accepting John Lloyd as its first patient, with the Ladies of Charity paying his fee of one dollar a day. Without realizing it, the sisters and the Ladies of Charity were laying the foundation for some two dozen health centers on the Pacific Coast and the care of millions; and in this age of small beginnings, they would also set the cornerstone for one of the nation's great medical centers in the rowdy lumber port of Portland a few miles away.



The hospital grew rapidly. Within a very few years two wings had to be added, increasing the capacity to over a hundred beds. The hospital became a formidable landmark as the town sprang up around it.





Spring came on at long last, heralded more by the wild blooms across the meadows and the many trilliums poking their heads up in the deep woods undergrowth than by the oft-soggy skies. But still Mother Theresa and her little band of sisters were lodged in Vancouver, for progress on their hospital building continued to lag, despite the constant proddings by Mother Joseph who made regular trips to Portland to inspect the work. She wished to make sure certain things were done correctly on the staunch structure, for she had her own pride in top-grade craftsmanship which would produce a lasting building.

Completion of the structure had been promised by March, but there were setbacks again and it appeared, despite the mounting need, that it might be late summer before the hospital could be in operation.

"A large force of carpenters, painters and plasterers are engaged in giving the finishing touches to St. Vincent Hospital, which will be ready for occupancy in June," noted *The Oregonian* hopefully in April. "The building presents a handsome exterior, and the interior arrangements are such that for comfort and accommodation, they will be equal to any hospital on the coast."

Before the end of the year, too, Portland would probably be blessed by two hospitals in the same general locality, for the Episcopal community was also in the throes of construction on a four-acre site at Twenty-first and L streets, about a mile west of St. Vincent toward the hills. Their hospital would be called the Good Samaritan, and the two would remain the oldest hospitals in Oregon. A certain feeling of spirited competition existed between the two projects, partly because they were being built simultaneously in the same part of town, and partly because of the two religious faiths, reflected in the open opposition by Episcopal Bishop B. Wistar Morris. However, the sisters believed that Portlanders more heavily favored their project, not only because they were first to begin, but from their outward sympathies toward the poor. In time, both hospitals

would be needed at the rate Portland was growing, and in emergencies each would assist the other. But for the moment the race was heated to see which would be the first accepting patients.

It was difficult trying to be a part of a community while based at Vancouver, especially when you were viewed with doubt by a portion of the population. Once the nuns were established in Portland, to be seen daily on the streets, talking with people and making the rounds of their good works, they felt that stronger backing would come their way, since the work of the Sisters of Providence was widely recognized. They also had the active interest of the St. Vincent de Paul Society and "some generous lady helpers" who realized the dire need for good hospital care in Portland. The steady growth and success of the Vancouver hospital demonstrated that these nuns in their flowing robes and garniture which covered all but their shining faces knew what they were about. In time, Portlanders would become impressed by their devotion not only to God, but to service and hard work, especially with the ill, the dying, the injured and the poverty stricken. That the hospital would be open to all, not just those of the Catholic faith, was already making an impression on conservative Portlanders, although many adopted an attitude of wait-and-see.

By May the building appeared far enough along that Mother Theresa felt they could leave their sheltered existence. On May 10, Mother Theresa and Sister Joseph of Arimathea landed again on the Portland waterfront, but this time to stay permanently. Even though the hospital was far from ready, they could begin their missionary work in the community and also attempt to get some of the finishing and cleanup done on the big building. It was a shaky beginning, for they were without funds, only enough for the boat fare and as financially poor as the people they intended to help. At this horrifying moment, in the damp, gloomy and unheated building for their first meal, their total wealth consisted of "a piece of bread and butter" and "a confidence in Divine Prov-



idence for a second.” They could only resort to their own strong faith, recalling the Gospel words, “Seek first the Kingdom of Heaven and all the rest will be given in abundance;” and also the words of their beloved Mother Gamelin, echoing from far-distant Montreal: “God and the poor; that suffices.”

The workmen had left the building in a magnificent clutter, with pieces of lumber scattered all about, walls and floors unfinished, plaster and paint drippings everywhere, and dirt and dust wherever you looked. The prospects of setting up housekeeping in this bone-chilling, eerie structure with its frightening shadows of late afternoon and night left the two sisters with many doubts and as they admitted later, “several emotional moments”, even though they had tried all these months to prepare themselves for these trying days. Everything seemed to be lacking, but they needed to get started, for the other sisters would arrive in a few days.

Mother Theresa and Sister Joseph called on some of the women who had indicated an interest in the hospital. Through them, the nuns were able to buy on credit. Their immediate need, in addition to some food, was cleaning tools.

“Some charitable friends gave us a bargain,” they remembered. “That gave us courage.”

Brooms, scrub brushes and soap were among their first purchases. Next day, “helped by some children, we began to clean the house.” The entire two-story building on block 471 facing on what was then Eleventh Street had to be scrubbed many times, and what few furnishings were acquired needed to be placed. Scattered, discarded boards were removed or burned for heat, shavings and sawdust swept up, paint scraped from windows and doors, filth and trash hauled away, the daylight basement and attic scoured thoroughly. Day after day the two nuns labored long hours on hands and knees, or standing until every muscle ached. In two weeks, on May 24, Sister Peter Claver joined the pair of hospital pioneers; a few days later Sisters Mary Sabina, Mary Perpetua and Marie de Bon Secours (Mary of Good

Hope) arrived, and Mother Joseph appeared on the scene. Mother Theresa and Sister Joseph of Arimathea were happy to see them, for if this building were ever to become acceptable for patients by summer, all the physical power that could be mustered was now required.

“We divided the work,” they recorded for Montreal, “which without the help of Heaven would have been beyond our strength. Never in our lives had we worked so completely for God . . . By hard work we succeeded in making the house presentable. But the floors, the painting, and plaster were so dirty that it was only after eight months of daily washing that we really had them clean.”

Hardships and problems confronted the sisters with each passing day. Every morning at 5:00 A.M. the sisters left the hospital building for low mass at the cathedral at Third and Stark—a “very long walk” along uncertain streets. Sister Peter Claver, whose feet were too swollen from being on them constantly, was unable to go; she stayed behind, having breakfast ready when they returned. Almost daily, after a light breakfast, Mother Theresa and Mother Joseph made two or three trips on foot to the center of town, seeking supplies and financial support. The distance was considered “well beyond the strength of most women.” Often they returned laden with supplies. The sisters couldn’t afford a buggy, but sometimes a kind person would give them a lift. The only public transportation was Ben Holladay’s small horsecar operating along First Street, which wasn’t much help, since it ran nowhere near the hospital.

Nevertheless, the sisters were making inroads on the community and were giving assurances that there would be a public hospital.

“The people, impressed by the sisters’ courage, took an interest in the work,” Sister Peter Claver recorded. “We had come to be an object of curiosity, too. On Sundays especially, so many curious people came to see us that by evening, we were so tired that we could hardly stand.” Despite their weariness,

they needed to be gracious and answer the questions, for each visitor was a prospective supporter.

There were heartening moments, too, indicating powerful Portland business interests were watching their progress.

“Mr. Ladd (William S. Ladd), a wealthy banker, impressed by our work, gave us fifty dollars worth of floor covering for the corridors.”

Finally they could see true progress, as “the work became lighter and the house lovely.” Often visitors asked when the hospital would be open. Mother Theresa hoped it would be very soon, although much still needed to be accomplished to make rooms ready and install furnishings and equipment, a lot of it gifts from the local community or solicited by the lay society and the sisters. The setbacks continued, bills piled up, funds were depleted. The workmen were still about, leaving their debris so that the sisters had to clean up after them once again.

“To our great disappointment, the workmen took more time than was expected,” Sister Peter Claver observed. “Instead of being finished in March at the latest, it was May 15 before we could move in. Even then much was still unfinished.”

Almost a year had passed since the site was presented the sisters by the St. Vincent de Paul Society. While the sisters and volunteers labored in the hospital, the nuns continued their missionary work with visits to the women of the community who had been helping them, and to homes of the sick and poor. Now they were within a month of the dedication day set for the Feast of St. Vincent in July, and much yet to be done. On June 24 they were forced to admit their first patient, a non-Catholic young man, G. Allen, “who had led a wicked life” and was desperately ill. The sisters took him in, although there was no place, and nursed him back to health. Grateful for his care and showing interest in the struggle to launch this hospital, he remained a year, assisting the sisters in every way that he could, helping to offset his bill of \$365 for board and medical service at \$1.50 a week, as a “charity case.”

A few days later another young man, only 21, requested admittance. Mother Theresa’s initial fears were being borne out. Word was spreading that the hospital was accepting patients, before they were ready. Yet the sisters couldn’t turn this fellow away anymore than they could the first one, for he, too, was obviously suffering. So great was his pain that next day he tried ending his life by leaping from an upper story window. Then he lapsed into a coma and died, the hospital’s first death before it was opened. Four days before the official dedication, a third patient named S. Cummings was admitted, stayed twelve days at \$1.25 a day, and paid his bill of \$15 when he left on July 28. If the sisters had held any doubts about whether or not their hospital would be used, their first patients indicated otherwise. And the fact that these patients were non-Catholics helped silence any late rumors that this new hospital would be restricted to those who belonged to the faith.

At long last on July 18, 1875, one year since the Sisters of Providence acquired the site, Portland’s first true hospital was opened with appropriate dedication ceremonies. It was far from being merely a Catholic event; the entire town was fully aware of the cornerstone of progress that this new institution represented, the beginning of a new age for Oregon and the Pacific Northwest. Thousands of citizens, including Portland officialdom, turned out for the affair marked by a gala street celebration and public inspection of the new building. Indeed, the dedication was unique to Portland history in that, especially in a rawboned lumbering seaport such as this one, the activities of a religious order—and a group of women at that—could command such attention for a single achievement. But Oregon needed this hospital very badly and Portlanders were happy to see it as part of their rapidly developing community.

“The weather was beautiful,” wrote Sister Peter. “The whole city of Portland was excited. At three o’clock in the afternoon the band began to play. A



long procession of men in uniform of various associations carrying banners made their way toward our humble dwelling that we had decorated for the occasion. The statue of St. Vincent de Paul, made by Mother Joseph of the Sacred Heart, ornamented the roof. The St. Vincent de Paul Society had given a \$100 gift to defray its cost."

The crowd gathered early at the hospital and along the line of march from the cathedral at Third and Stark streets. The St. Vincent de Paul Society was determined to make this a citywide celebration that Portland would remember, with bands, banners and many marchers. The guests, among them the Blanchet brothers who had brought the sisters to the Pacific Northwest, had traveled far to participate in the ceremonies. The towns of Seattle, Yakima and even Baker were well represented.

The line of march, organized by E. J. O'Dea who later became Bishop of Seattle, moved on Front to B Street (now Burnside), then up to Eleventh and along that street to the hospital grounds. The bands played lively tunes all the way, with Capt. Joseph R. Wiley as grand marshal pacing the many uniformed marchers and carriages bringing the dignitaries and women of the Catholic congregation who had taken special interest in the hospital project from the beginning. Yet it is passing strange, or significant, that newspaper accounts of what was considered one of the most festive Portland parades of the time made no mention of Mother Theresa, Mother Joseph and the sisters who had designed and built the hospital, solicited funds, scrubbed it spotless, and would be responsible for its upkeep and the welfare of its patients in the years to come. In the line of march they went unhonored and unsung.

"The dedication of St. Vincent Hospital," said Father Fierens before the large gathering, "is one of those events in which all true philanthropists will rejoice. It is one of those institutions which bring the greatest blessing to whatever society or community is favored with it, and with which a benign Providence has now blessed the city of Portland.

This auspicious occasion is then of the greatest interest to this community, and I dare say to all of us. I think we may feel proud of our St. Vincent Hospital, this future home of the sick, as it is the first in the state and one in which not only Catholics, but every citizen is interested, as it admits all religionists. True charity knows no creed nor country."

Stressing the lack until now of such an institution in Oregon, Father Fierens outlined the good works of St. Vincent de Paul, the great apostle of charity, and of the beginnings of his Daughters of Charity through a long line of frontier events extending over many years which led to this Portland institution. He praised the local support, adding:

"We must here also thank the good citizens of Portland who have aided with no sparing hand in its erection. They knew that such enterprises as these are limited in their benefits to no particular creed but that their good results must affect the entire community. So men who were not of our faith have not hesitated to give their means to push the enterprise forward."

However, he warned that the trials of the hospital wouldn't diminish with its opening. For one, there was a \$15,000 debt, the project to date having cost about \$20,000.

"It is true," he admitted, "a heavy indebtedness still hangs over our St. Vincent Hospital which will somewhat bar or clog the wheels of its usefulness. That it may be a complete success depends upon the people of this community, but I have no fears as to that."

Father Fierens had great confidence in Mother Theresa, Mother Joseph and the other sisters to bring the hospital out of the red, although he didn't say so. But the good Father and the community perhaps didn't realize the extent to which the sisters would go in their works with the poor and down-trodden, nor the heights of their ambition for service that would be still expanding a century later. Nevertheless, this was a formidable building, symbolic of the strength of the institution itself even in



Opening of St. Vincent Hospital touched off a gala celebration, with a big parade from the downtown area to the site, followed by dedication ceremonies. The scene must have been similar to this one along First Street.





these embryo stages; and all of it resting on a significant cornerstone containing records, data, newspapers, coins, photographs and religious symbols that were meaningful for a promising future.

The formal ceremonies done, the eager crowd pushed forward to inspect the hospital, which was indeed far from a "house" as modestly described by the sisters. The great frame building was 50 by 82 feet, three stories high plus a solid brick basement with a ten-foot ceiling, and each story containing some 4,000 square feet of floor space for a total of 16,000 square feet in all. Those who knew construction could readily see that it was soundly built in keeping with the standards of quality workmanship characteristic of Mother Joseph, and also measuring up to the latest standards of hygienic and health care facilities under the guidance of Dr. Alfred Kinney, who had been working closely with the sisters in the establishment of this hospital. When fully equipped, the hospital would be able to care for from seventy-five to one hundred patients in wards and private rooms. The hospital, visitors noticed, had several wards, a typical one 20 by 32 feet, ventilated by tall windows which gave off a grand view of the active city, the river, the forested hills, and the gleaming mountains in the distance. And each bed was screened with curtains from the others to lend the patient some privacy.

The entire building appeared spotless. All that soap and water, all those sore knees and aching backs suffered by the sisters, were now leaving an imprint on an amazed public. Just beyond the main entrance onto Eleventh Street was a sizable reception room and close by, the dispensary was already stocked with various apothecary jars, bottles and vials with various medicines needed to fill prescriptions. Compartments were installed for bandages, splints, surgical instruments and other equipment required to meet any medical situation. The proud and excited sisters who were conducting the tours pointed out that the dispensary had been equipped by one of the Sisters (Peter Claver) who for twelve

years had been responsible for a similar department in one of their hospitals in the East.

Beyond this section was the medical department, under the supervision of Dr. Kinney who would have as his assistant Dr. E. H. Jones, another leading Oregon doctor of the time. Eight-foot hallways ran the length of the building on all floors. These hallways would serve as year-around promenades and exercise areas for the patients. Across the hallways on the main floor were some of the private rooms and apartments. Three suites of rooms for women patients were in this area, while in the northeast section beyond the main stairway was a smoking and recreation room for patients well enough to leave the wards. Further on was an entirely separate ward for consumptives or tubercular patients, set apart from the others.

Stairs to the upper stories were broad and easy. In the center of the second level was a small chapel for use by the sisters, and also the sacristy. This floor had additional wards, private quarters, bathrooms, linen closets, and a library and reading room with many of the volumes donated by friends of the hospital. Two other wards were being developed on the third floor, called the St. Francis and St. Patrick's, plus an apartment for the night watch. Under the eaves stood two large water tanks supplied by an artesian well and connected by pipes to the floors below. Twelve windows in the roof gave natural lighting to this third floor, while at each end were windows for good cross ventilation.

A "spacious kitchen" and an "immense boiler" were located in the huge daylight-type basement. The boiler supplied hot water to all the bathrooms above. The basement also contained a large patients' dining room, suites for "female inmates," apartments for hospital attendants, storerooms, closets, a cellar for preservation of fruits, vegetables and other food stuffs, and beneath the main entrance, a community room where sewing and repairs could be handled on all hospital and patients' linen and clothing.

Everywhere they turned, visitors were astounded by what the sisters had accomplished. Verandas overlooked the already partly landscaped grounds with their walkways, shady arbors, and a large number of fruit trees arranged with seats and tables into secluded grottoes where patients could rest and relax during the good weather. On southern and western portions of the block, a sizable garden was planted with vegetables already near to harvesting, while in the very far corner were chicken houses, a barn, cow sheds, woodsheds and the laundry. Guides pointed out that these were well removed from the hospital so that they would be of no danger to the patients; also that adequate sewage had been installed prior to beginning construction.

Surrounding the grounds on three sides was a high fence, restricting the view for patients' privacy, while on the front side was a white picket fence and two alcoves of flowers and shrubbery. Throughout the afternoon and into the evening, streams of people came to see the new building and to linger over the garden refreshments of cake and ice cream served by the volunteer women who also managed to collect \$300 toward the hospital finances. The city band continued playing light, familiar and popular tunes, while the reception moved ahead in the easy-paced fashion of the gaslight era.

Portlanders drifted homeward; they realized that this was indeed a day to remember, and that this new hospital would likely long be a proud landmark of their town. But what was even more amazing was that it had all been engineered and equipped by women, and that these women had brains and obviously knew what they were doing. Of course, there were still the doubters who didn't believe what Father Fierens really meant about "charity knows no creed or country." But before this exciting day was entirely done, as the weary sisters were saying a last farewell to late visitors and turning down the gaslights, the cynics would have their answer. Suddenly, in a flurry of excitement, the hospital's first emergency case arrived at the door. The timing was

so perfect that it seemed a part of the day and a press agent's dream, for the man was badly injured, and he was Oriental . . .



View of the surgery of the first St. Vincent Hospital. Nuns assisted the doctors; the area had virtually no trained nurses. Shown in this early posed photograph are, from left: Rosa Philpott, one of the nursing school's first graduates; Sister Alford of the Sacred Heart, Agnes Johnson (student), Dr. Andrew C. Smith, an intern named Kane posing as the patient, and Sister Andrew.



Portland now had a bonafide hospital. But the flowery words and promises of Dedication Day would be put to the test, and all the town would be watching. The sisters might be first-rate cleaning women and skilled at wielding a paint brush, but could they run a going hospital successfully, with its grueling 'round-the-clock demands and constant crises?

Yet the last visitors of Dedication Day were still lingering on the walkways of those new, lovely gardens when about 8 o'clock, a horse-drawn ambulance clattered to the entrance way. The man inside had an arm badly mangled by machinery. (Some accounts say it was a leg.) He was weak from loss of blood. Fortunately, Dr. Kinney was still around. The Chinese man was rushed into surgery, but as he was very weak, Dr. Kinney decided to postpone the necessary amputation until the following morning.

The sisters attended the patient throughout the night, though all were very tired from the long day of celebration. For many other successive nights, they watched closely over the workman, doing all they could to relieve his suffering. He recovered from the ordeal and was able to make his own way in the world again. The hospital's first surgical patient paid his bill in full, twenty-one dollars for twenty-one days' stay at one dollar a day, as recorded by hand in the hospital's first account book, dated 1875, for "Mr. Joe Chinaman."

The incident, when word got around, couldn't have been more beneficial for the hospital in answering critics that it would never admit and give good care to patients of any race, color or creed. It called attention also to the fact that one of the Northwest's most skilled and respected doctors was the head physician, and as the sisters acknowledged in their report for the year, "it was his skill that really made the reputation of the hospital."

Shortly, others were being admitted for various kinds of ailments, among them a number of charity patients who would never be turned away. The first two babies were born there, in itself a surprise since

both the expectant mothers were non-Catholics, yet requested admittance, and the embarrassed sisters hadn't provided any maternity ward, since most women had babies in their homes. No one was shunted aside, although at times the nuns wondered silently about the backgrounds of some of their patients, described in reports as an "unrepentant man," "an atheist," and "a woman of questionable character who was a scandal to everyone." Indeed, she didn't quite make it into the hospital.

"We were happy to admit her," the sisters reported, "but when they opened the carriage door, she died immediately without an opportunity to receive absolution, although a priest arrived at the same time."

There were many conversions and in this largely Protestant community, stories spread that the sisters were more interested in converting patients, especially the dying, to Catholicism, hoping to acquire a legacy for the hospital, than in the daily comforts of a patient and perhaps making him well again. The stories were untrue, of course, but Portland remained a hotbed of bigotry and anti-Catholic feeling for many decades, well into the twentieth century. From time to time, attacks were made against the sisters' hospital, especially the internal operating affairs of the institution. One local publication, the *Polaris*, was particularly bent on stirring up an investigation of what happened to their funds which the *Portland Oregonian*, in defense of the sisters and the hospital, described as "most impertinent and contemptible." The Catholic *Monitor* reminded the public that the institution "does not receive a cent of the people's money, save such small donations as the charitable citizens of every creed donate to the Sisters of Providence through respect for them and the love of good."

Furthermore, the angry editor of the *Monitor* pointed out, "St. Vincent Hospital has no shareholders to gratify, it has no taxpayers to satisfy, and inasmuch as it has never received a single cent of public funds from the city of Portland or the county of



Multnomah, the citizens thereof have no claim whatever for an accounting, nor have they asked for it . . . There is no 'secrecy' about Catholic hospitals, and St. Vincent is no exception. St. Vincent is open to visitors every day of the week; patients leave there daily; and let the *Polaris*—if it is anxious for knowledge—send a representative to see for himself."

Where did the contributions go? The *Monitor* editor pointed out that the funds were spent for medical service, medicine, and food and clothing for the "free patients" at St. Vincent, which averaged from 50 to 70 per cent of those admitted. Donations also went for hospital expansion, development of the grounds, and all else necessary for cleanliness and to benefit the patient's welfare. And he concluded:

"The heroism and virtue displayed by the Sisters of Mercy and the Sisters of Charity on the battlefields of our Civil War and throughout every epidemic that has raged in this country, have raised up for these holy ladies of the Lord tens of thousands of noble advocates among the American element in every country, who sing their praises with Protestant lips, and whose ready arm would strike prone to the earth the dastard who dared to defame the good name and fame of the noble daughters of St. Vincent de Paul. Thus we have answered the *Polaris*, and if it wants any more light on the subject it need not exist in ignorance nor exercise any impertinence because it is without knowledge. All it has to do is to ask and it shall receive."

The sisters were used to rebuffs, and degrees of bigotry and indifference. But in this initial struggling time for their new hospital, they were building its reputation and their own as well, demonstrating their willingness for hard work and long hours, and their genuine concern for all who found life difficult. Anyone could get a free meal at the hospital and even lodging in return for a little work; there was always wood to cut, windows to wash, repairs to be made.

In the first year, to July 1876, the hospital admitted 320 patients, of which 285 were discharged. There were thirty deaths. Fifty-two people were

given care in their home and 718 visits were made to ill persons. Six home patients died and the sisters made fifteen night watches with them, while 830 shifts of night duty were made within the hospital. Eighty-two charity patients received care representing 1,640 hospital days, and 1,050 free meals were served. The hospital also boarded an orphan boy, four girls, a clergyman and one layman.

Most of the hospital's rates ran about one dollar a day, plus charges for various medication, Sister Peter Claver's formulas, and other extras, among them bourbon which seemed an all-purpose favorite of many patients, the famed cure for "snake-bite" on the frontier. The year's end found Mother Theresa's books in balance, but little progress against the huge overhanging debt of the place. Only \$200 had been paid against that debt this year. The hospital received \$4,821.80 for patient care, \$1,628 from alms and collections, \$200 for surgery, and \$1,000 from "other sources" for a total of \$7,649.88. Expenditures went as follows: \$200 on payment of the debt; \$103, construction and repairs; \$2,413, furniture; \$2,784, food; \$209, animal care; \$633, wages; \$105, heat and lights; \$279, clothing; \$407, surgery; and \$485, other expenses.

The building's overall cost had now been determined as \$22,244.68, of which \$6,888 had been paid, leaving a huge balance of \$15,356.68 to worry not only Mother Theresa but Mother Joseph who had gone through this same kind of agonizing time with her Vancouver hospital. The mortgage holders were concerned, too, for the sisters always seemed to be buying things on credit and were all too willing to take in any stray dog that scratched at their door. To the moneychangers this wasn't sound business. By the following year, the charity load had reached 103 patients, some of whom had virtually taken up permanent residence at the hospital. But the sisters were developing other sources of income; and the ladies and men of the St. Vincent de Paul Society and other "friends of the hospital" were busy with quite profitable bazaars and other public benefits to help



Early patient records were far different, showing only the patient's name, home area, occupation, date of entry and date of discharge or death. Life was indeed far less complicated than today. This page appears in the first volume, 1875-86, the oldest hospital medical record book in Oregon.

# ST. VINCENT'S HOSPITAL.

# PORTLAND, OREGON.

Name	Country	Age	Sex		Residence.	Religion	Profession.	Entered.			Disease.	Discharged.			Died.					
			M.	F.				Year	Month	Day		Year	Month	Day	Year	Month	Day			
Honey John	Iceland	39			Salmon	1		1875	June	18								1900	July	10
Alan George	America	22	1		Portland	2	Plumber	"	"	24			1875	July	6					
John Thomas	"	21	2		"	3	Agent	"	"	28										
John Thomas	"	114	3		"	4	Carpenter	"	July	12										
John Thomas	Sweden	22	11		"	5	Labourer	"	"	14			1875	Sept	14					
John Thomas	England	21	2		"	6	Fisherman	"	"	16			"	July	28					
John Thomas	"	25	6		"	7	Labourer	"	"	19			"	Aug	2					
John Thomas	Canada	25	7		Portland	8	"	"	"	20			1876	June	29					
John Thomas	America	21	8		Portland	9	Miner	"	"	26										
John Thomas	Iceland	27	9		"	10	Labourer	"	Aug	2			1875	Aug	17					
John Thomas	America	26	10		"	11	"	"	"	6			"	"	11					
John Thomas	Iceland	29	11		"	12	"	"	"	7			"	"	9					
John Thomas	America	20	12		Oysterville	13	"	"	"	8										
John Thomas	Iceland	10	13		Portland	14	Auditor	"	"	8										
John Thomas	Iceland	20	14		"	15	Soldier	"	"	9			1875	Dec	1					
John Thomas	"	23	14		"	16	"	"	"	10			"	Aug	19					
John Thomas	England	23	14		"	17	Saylor	"	"	12			"	Oct	5					
John Thomas	Iceland	29	15		"	18	Merchant	"	"	13			"	Aug	20					
John Thomas	"	22	16		"	19	Labourer	"	"	14			"	Sept	10					
John Thomas	"	36	17		"	20	"	"	"	16			1876	May	7					
John Thomas	"	10	18		"	21	"	"	"	20			1875	Oct	23					
John Thomas	America	26	19		St. Johns W. Side	22	"	"	"	20			"	"	20					
John Thomas	Iceland	25	20		Portland	23	Carpenter	"	"	21			1870	May	5					
John Thomas	England	19	21		"	24	Waiter	"	"	23			1875	Sept	21					
John Thomas	"	22	22		Portland	25	Fisherman	"	"	24			"	Oct	15					
John Thomas	"	15	23		Portland	26	Trimmer	"	"	26			"	Sept	26					
John Thomas	Iceland	22	24		Vancouver	27	"	"	"	27			"	"	25					
John Thomas	"	23	25		Portland	28	Broom maker	"	"	30			"	"	7					
John Thomas	Iceland	22	26		"	29	"	"	"	30			"	"	7					
John Thomas	Iceland	22	27		"	30	Labourer	"	"	30			"	Oct	23					
John Thomas	England	28	28		East Portland	31	"	"	"	30			"	Sept	30					
John Thomas	Iceland	32	29		Portland	32	"	"	"	31			"	"	31					
John Thomas	Canada	40	30		"	33	Labourer	"	Sept	2			1875	Nov	4					
John Thomas	Iceland	112	29		Bella	34	"	"	"	4			"	Oct	7					
John Thomas	"	40	30		Portland	35	"	"	"	4			"	"	7					
John Thomas	America	21	31		Chicago	36	"	"	"	3			"	"	12					
John Thomas	Iceland	25	32		San Francisco	37	"	"	"	5			"	"	17					
John Thomas	English	22	33		Portland	38	Labourer	"	"	10			"	"	18					
John Thomas	American	42	34		Portland	39	"	"	"	10			"	"	18					
John Thomas	Irish	12	35		Portland	40	Fisherman	"	"	12			"	"	4					
John Thomas	Swede	23	36		Portland	41	Labourer	"	"	14			"	Sept	24					
John Thomas	America	27	37		Portland	42	"	"	"	16			"	"	21					
John Thomas	"	48	38		Portland	43	"	"	"	16			"	Oct	18					
John Thomas	"	45	39		Portland	44	Mechanic	"	"	17			1876	Feb	14					
John Thomas	Norwegian	29	40		"	45	Carpenter	"	"	18			1875	Oct	4					
John Thomas	America	22	41		"	46	Labourer	"	"	20			"	"	3					
John Thomas	"	29	42		Portland	47	"	"	"	20			"	Sept	27					
John Thomas	English	16	43		Portland	48	"	"	"	20			"	"	22					
John Thomas	Irish	60	44		"	49	"	"	"	21			"	Oct	22					
John Thomas	"	60	45		Portland	50	"	"	"	23			"	"	7					



The original St. Vincent Hospital overlooking Couch Lake as it appeared when opened in 1875. The 75-bed hospital had both private rooms and wards. Wings were added and more land acquired, but industrial air and noise pollution eventually forced the sisters to seek another site.





ease this grim financial picture. The sisters also made local solicitations, but these were oftentimes small. The public still didn't grasp the full significance of having such a hospital in its midst, except when a crisis arose involving a loved one, from an accident or sudden illness, and then the true value of the place came home to them.

As the nation began celebrating its centennial in the spring of 1876, the sisters decided upon a sweeping trek through the Willamette Valley and southwestern Oregon, clear to the coast, to raise funds for the hospital. Perhaps they were going far afield, but this hospital was an important institution to all of Oregon and such a trip would certainly underscore that fact. In all honesty, they called it a "begging tour"—not a drive, a donating nor solicitation trip—for that was indeed what it was. They would go from crossroads to village, hamlet to town, farm to farm, pounding on doors, asking sums small and large for the hospital. This had been the method by which Mother Joseph had saved the Vancouver hospital more than once when financing reached a crucial stage, as was now occurring with the Portland institution.

Sister Joseph of Arimathea and Sister Perpetua headed south in mid-May through the Willamette Valley, traveling by whatever conveyance could be found for the very least expense. They met with only mild success, averaging from \$15 to \$20 per area, for the nuns were greeted with suspicion and coldness by the staunchly conservative Protestant families of the valley towns. The worst place of all was Eugene City where the sisters were "turned down at every door" and "an old Methodist said it would be a sin to give them anything." Only two Catholic families were found in Eugene, each giving a modest donation.

In a cold, driving spring rain that seemed to hang on forever, the sisters made it over bad roads from village to village, often having to walk unless some kind person gave them a lift by wagon. They agreed that Oregon's poor roads were "unsuited for women

travelers." Often they were soaked and chilled to the marrow, eating only one meal a day to save expenses. Collecting money in this fashion was no picnic, they learned, and the pair longed for the warmth and safety of their quarters in the Portland hospital.

So far their "take" was meager, but their hopes were high that a vein of gold might be found upon reaching Jacksonville, the great mining town near the Oregon-California border. The sisters had been told about the rich strikes and bonanza mines of the Jacksonville area. They could recall the successes of Mother Joseph in the gold fields of eastern Oregon, Idaho and Montana which had paid the Vancouver bills and helped to expand the "cradle of missions in the West." It was this prospect that kept them going south to the Applegate Valley.

Mother Joseph, at the suggestion of a friend, conceived the idea in the mid-1860s to confront the miners and mine operators at the source of the treasure, rather than waiting until they reached the towns to fritter away their wealth in the saloons and hurdy-gurdies. Rich strikes were being made throughout that inland country at Idaho City, in the Blue Mountains, and in Montana's Alder Gulch. Hordes of would-be miners surged up the Columbia River, right past Mother Joseph's struggling community, seeking the yellow dust. Millions in gold were coming back down the river on Captain John Ainsworth's grand sternwheelers, bound for the San Francisco mint. At times, injured and ill miners were brought to the Vancouver hospital for treatment.

The mission was always broke, always in debt, and financing in sizable sums was unavailable in Vancouver where most of the people were quite poor. Sometimes it seemed the hospital and the entire mission project might fail. It became an embarrassment for Mother Joseph to be always making collections and asking for help from the fort, although General William Harney and Colonel George Wright received her with courtesy and along with the men and their families, would donate to her mission. But as a beggar, the Mother Superior was very persistent



and sometimes, she rightly suspected, people gave in just to get rid of her.

Unhappily, as the financial picture of the mission improved in its early years, so did the expenses which placed them forever behind with their creditors in Vancouver and Portland, and also thwarted Mother Joseph's ambitions for expansion of the mission. The mission responsibilities were growing rapidly, with some forty patients at St. Joseph's Hospital, one hundred children to feed and shelter in the mission school, a half dozen elderly people, and the sisters. More facilities were needed, but how do you finance them? Mother Joseph turned her eyes to the upriver gold mines.

That first trip to the eastern mines was a far more strenuous ordeal than had been envisioned, even for Mother Joseph who was more robust than many of the nuns. Realizing her own shortcomings as a warm personality, Mother Joseph took along Sister Catherine, an Irish colleen with a quick wit which, she felt, could pull the gold right from the miners' pokes, in contrast to Mother Joseph's more grim, direct approach.

The two nuns boarded the *New World*, one of the finest of the river steamboats, in July 1866 on the first leg of the upriver journey. As their guide, they took along Father Louis Saint-Onge, a priest at the mission. The long ride by crowded stagecoach from the upper river landing, following a brief visit to the Walla Walla mission, was an unending chain of teeth-jarring jolts. The nuns were jammed in the heat and dust among miners, roustabouts and drummers, all bound for the diggings at Idaho City, beyond Boise. Mother Joseph might have preferred joining the guide on the stagecoach roof, save that it would have appeared undignified for a woman of the cloth. But what was ahead for her would likely be considered highly undignified anyway.

The small party was met at Idaho City by the Reverend Fathers Toussaint Mespellier and Andre Poulin who were informed in advance of the nuns' coming and treated them warmly, introducing them

to Catholic families of the camp and giving advice as how best to proceed with their collections. This was vastly unfamiliar territory for the sisters, a strange world far different from the door-to-door collecting in Vancouver and Portland. The miners were a hard-living, rough talking, free wheeling breed, who weren't always approachable, especially by women other than the dance hall girls. The best way was to corner them in the mines, at their work. Other miners, sympathetic to the sisters' project or knowing of the growing downriver mission and its good works, volunteered as guides to the diggings. Mother Joseph and Sister Catherine shuddered, for they'd never been down into a mine before. The descent hundreds of feet below the surface or burrowed far back into a mountainside, with only blackness surrounding them, was frightening and perilous.

"But nothing," declared the Annals of Providence Academy in recording the begging tour, "could daunt the spirit of Mother Joseph when there was a question of gaining even slender funds for the lifting of the burdensome debt beneath which her foundation in Vancouver seemed about to fail."

The determined pair worked hard, at much risk, for every dollar obtained, seemingly as difficult as extracting the gold nuggets from the ground itself. During six weeks of hardship in travel from mine to mine, down one shaft after another, they managed to receive "the pittance each man felt generous enough to donate to charity." The amounts sometimes were discouraging. Often the sisters were shunted aside or met with cold, blank stares, shrugs of indifference, verbal abuse, or merely a silent pull on a miner's flask. What were these crazy females doing anyway, down here in the bowels of the earth, in the dampness and danger from cave-ins at any moment? But such receptions only whetted their determination and indeed, they won the admiration of the miners as well as the people of the camp for their bravado on behalf of orphan children and those in the straits of terrible poverty, illness and death. Yet it was a painful experience, not easily for-

gotten, and all the future begging tours would be equally as difficult and tiring. The sisters felt at times that the idea wasn't such a good one, but in counting their collections, they were surprised to find \$3,000 which was quickly deposited at the express company office at Idaho City for safekeeping and shipment down river.

Overjoyed, Mother Joseph realized she had found her own bonanza in the gold country, by which to further her good works and ambitions for the Vancouver mission. The prospects held that the work could be carried forward in better financial condition than ever before, and without having to depend entirely on the goodwill of the army post and the small donations of the community. After a few days' rest, she was determined to make the trek into the Montana frontier to the isolated Mission of St. Ignatius, established in 1864 to work among the Indians as part of the Vancouver vicariate. This would be the first visit by a superior since the mission was established, and the lonely nuns would be overwhelmed. But Mother Joseph also had something else in mind. Arriving at Missoula, and relaxing a few days, she and Sister Catherine turned south to the diggings of Alder Gulch and Virginia City.

"We met with considerable coolness here," she commented, "yet succeeded in obtaining \$2,000. Many miners showed themselves to be very generous."

The region was infested with outlaws, too, despite the fact that Virginia City had cleaned up on the celebrated Plummer Gang two years earlier. Several times during these treks to the mines, Mother Joseph was confronted by bandits and once in a stagecoach holdup, she outwitted the gunman by sheer nerve, thus saving a large sum in her bag that she'd collected for the mission.

Now it was September; the sisters had visited the St. Ignatius mission for eight days and must head back across the mountains before the snow started flying. Over the narrow trails by horseback was the best way to the lower Columbia. This would also re-

duce expenses, already around five hundred dollars. The Jesuit Fathers loaned the horses and the sisters at St. Ignatius their saddles and riding habits. Father Saint-Onge and an Indian guide at the mission, Sapiel, would accompany them, and also Father Joseph Giorda, S.J., as far as Missoula. From there, they would swing west to Coeur d'Alene.

The eighteen-day trip was crammed with danger from the terrain, storms, wild animals, Indians and outlaws. At one point they were deep in the wilderness, 150 miles in either direction from the safety of missions at Missoula and Coeur d'Alene. As they camped one night in forest blackness, wolves began howling beyond the rim of firelight. The men and sisters feared for their animals, tethering them at their heads. Saint-Onge and Sapiel knew the wolves wouldn't normally penetrate the light, nor would a single animal attack, but there was little chance here for sleep or even rest. The howling brought more wolves until the small party was surrounded by at least half a hundred.

The horses grew nervous; the men built a roaring fire to keep the wolves at bay. But the woods were very dry from a former burn and the forest was suddenly ablaze, adding a new threat to the camp. Several times their tents caught fire and the saddles were damaged. The sisters and the men beat back the flames, as the growing forest fire was now even a greater threat than the wolves. They battled the flaming brands with prayers on their lips, amid flying cinders and choking smoke and howling wolves in what Mother Joseph later described as an "unforgettable night of terror."

Dawn chased away the wolves and the fire died down. But as the party prepared to leave, a movement of horses was heard and suddenly they were surrounded by an Indian war party. This was a new fear, but then the Indians saw their pectoral crosses and gave signs of friendship and respect. The sisters fed the Indians, but "cringed before their scalping knives which they kept ready to carry off the scalps of whatever Americans they would encounter."



“Happy were our party to see them depart peaceably,” Mother Joseph wrote. “God be praised.”

They followed narrow Indian trails through the dark forests and along ledges of the high mountains. Only occasionally would they meet a lone miner. Nights found them in small clearings with water, where they could camp and have grass for the animals. The forest was silent, but they were aware of dangers all around them. During one night Father Saint-Onge felt a coldness on his body which awakened him with a jolt. A rattler was bedding down with him. For a long while he remained motionless, fearing to startle the snake. Then with a sudden leap, he bounded straight up and the rattler fell to the ground.

On another evening, as they were making camp, Saint-Onge noticed tracks that Sapiel told him were those of a grizzly bear, the most feared animal of the mountains. They decided not to tell the sisters, but kept the fire high. Like the wolves, the grizzly wouldn't likely attack into the firelight. The night wore on without incident, but at dawn the bear hit one of the horses. Sapiel rushed forward; then the huge grizzly spotted him, the roaring animal abandoned the horse and gave chase. Sapiel zigzagged among the trees, looking for a good one to climb. Several times the bear almost caught him. One connecting swing of those massive paws would end Sapiel. The guide was losing ground. But fortune was with them again, in the sound of bells from a Mexican pack train. The grizzly was spooked by the bells and together with Sapiel's yelling, gave up the chase.

“Finally,” wrote Mother Joseph, “the trying ordeal of eighteen days in the saddle, extremely fatigued from the difficult days of travel, the long absence from home, camping under the heavens, on river banks and in sagebrush, we weary travelers reached the province of the Holy Angels, October 15, 1866, where the community of waiting sisters heartily received us and joined us in fervent prayers to God and to good St. Joseph, our unfailing protector,

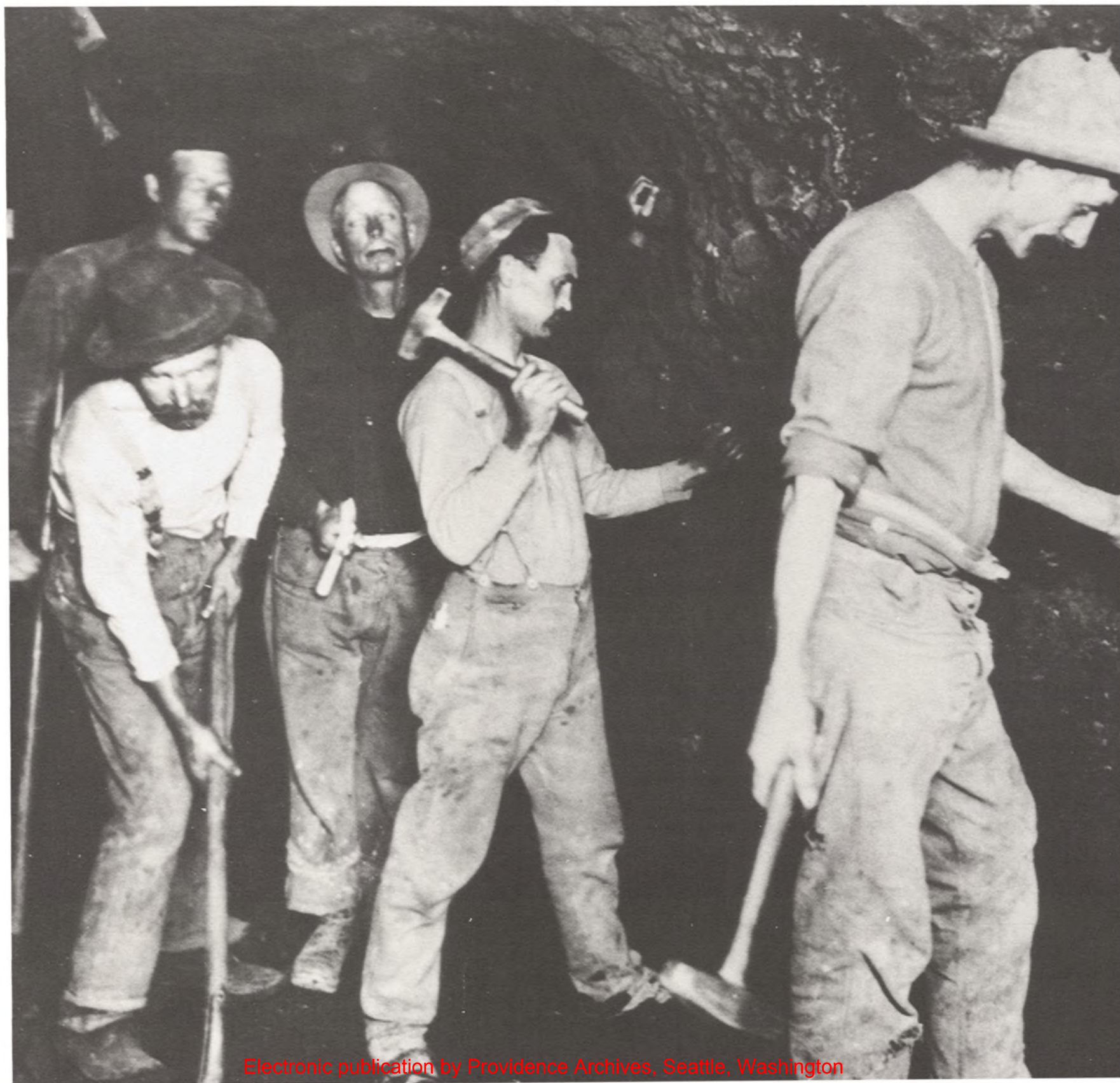
for a safe and fruitful return to the home nest.”

When the other sisters heard the stories of their experiences, told with verve by the young Sister Catherine, they all wanted to head for that raw-boned back country to beg for gold. The tours to the eastern mines became a regular part of the yearly routine, for the province always had creditors pressing, and Mother Joseph blamed herself for having mishandled the accounts. The best solution, it appeared, was collections at the mines, risky though it could be. Mother Joseph couldn't always go, for her responsibilities were increasing with the years. Sister Catherine took along Sister Prudent the second year. The plucky pair followed much the same route as that of Mother Joseph, with Father Saint-Onge again accompanying them from Walla Walla, and this time using horses for much of the trip. In satisfaction, Sister Catherine returned with \$3,000 which eased Mother Joseph's position with the creditors.

However, it was Mother Joseph's force and vigor which set the pattern and tone of these tours, even to outmaneuvering two men at their camp who she suspected were planning to rob them. In subsequent years she branched out to advise and supervise a growing number of hospitals, schools and other missionary projects of the Sisters of Providence in the Pacific Northwest, sharing the proceeds from her gold mining ventures with the other institutions, among the first being the new St. Vincent Hospital in Portland.

The sisters, in their determination to find the necessary funds to work with the poor and the orphans, ranged far and wide, not only to the gold mines but to the lumber camps and sea and river ports, into the coal mines of upper Puget Sound, to the fishing industry, to the Fraser River gold rush, and even a grand tour to Chile. The camps at John Day, Central City, Baker and Silver City, Idaho, were tapped, with thousands of dollars collected to support the sisters' activities. But in 1876 they decided to bypass Silver City during a tour to benefit the Portland hospital, for the town was in a depression, the mines

Mother Joseph and her sisters descended into deep mine shafts to confront the men on the job, asking for donations for their hospitals and orphanages. Some sisters were frightened about going into the mines.





The Sterling Mine near Medford, a hydraulic operation was one of the area's richest. The nuns called on many operations during their treks, but weren't always successful





closed, and the men idled.

"They tell me it is useless to try Silver City," Mother Joseph wrote Sister Vicar Praxedes. "Every month a collection is made there to assist poor families whose fathers have lost their wages for a year. Hoping to be paid later on, they refused to leave, preferring to suffer awhile."

In this national centennial summer, times weren't the best in the mining country. The nuns found donations smaller and scarcer than a few years before. On this excursion, they were collecting especially for the Portland hospital, a point (Mother Joseph wrote Mother Theresa) that confused some people since they hailed from Vancouver. Difficulties arose with local priests who wanted a percentage of the collections for their own work. Mother Joseph stood her ground, pointing out that the donations were solicited for specific projects in the Portland-Vancouver area and that this kind of "sharing" would only cloud the matter. But she apologized to Mother Theresa for what she was sending at this time with Sister Justina, ex-superior at Baker, "who will leave this evening for Portland, will deliver this with a few dollars we have gathered with the help of our sweet Mother of Providence. It is very little, but we console ourselves that we have done our best."

The sisters were loaned a carriage for making the rounds of the many camps of the Blue Mountains by a family at Canyon City. Only \$100 was collected in the Baker area for the "sick poor," another \$13 at Union, \$45 at LaGrande, and \$18 at Rutledge. They were able to pick up \$140 at Camp Harney, but had done best in the Blues around Granite City where \$500 was raised.

"Quite different from three years ago when Sister Joseph of Arimathea made the trip," Mother Joseph wrote to St. Vincent Hospital. "The bankruptcy of the Vertu (the Virtue Mine) created a real panic. \$148,000 for a small locality like Baker and vicinity is of interest to a small number of persons. Vertu (sic) will pay 64 cents on the dollar, as he makes it. They have hopes for next year."

If Sister Joseph of Arimathea and Sister Perpetua hoped to emulate Mother Joseph's bonanza-like successes of the past for St. Vincent Hospital, they stood to be sadly disappointed. They'd heard much about southern Oregon's roaring Applegate diggings where some \$31,000,000 in gold dust had been handled for Wells Fargo by the Beekman Bank. Gold strikes had first been made in the 1850s by prospectors wandering north from California's Mother Lode, and during the boom years millions were extracted, even from under the streets and buildings of Jacksonville itself, including the cell floor of the jail. Money flowed freely in this picturesque camp on the main stage route between San Francisco and Portland, across the saloon bars and in the gambling joints and honkey-tonks; and at least one local church was financed on gambling bets and saloon donations. But J'ville, although still wild, was now beyond its prime. It clung to the county seat, but completion of the Oregon-California railroad to Ashland in 1884, bypassing Jacksonville for Medford only five miles away, would deal Jacksonville a death blow from which it would never recover.

The local Catholic priest seemed momentarily unhappy at the coming of these Portland nuns, for he had his own problems making ends meet and the sisters were jumping his claim. But gradually he warmed to the situation, while the sisters of the Holy Names gave them a gala welcome, even decorating the school classrooms with flowers, inscriptions of Faith, Hope and Charity, and a large poster of greeting. During a school assembly, one girl presented the sisters with a seventeen dollar gift, representing deprivation from candy and other treats for a picnic the girls were planning. And three small orphan girls, having nothing else to offer, gave their prayer books which the sisters accepted so as to not hurt the children's feelings.

In church the priest explained the sisters' mission and "although poor," gave ten dollars in hopes of encouraging others to contribute to this first great hospital in Oregon, which although at the far end of



the state, would likely set the pattern for similar institutions in the years ahead. The Holy Names Sisters also gave ten dollars, but the Jacksonville parish was a poor one and money tight in the town which four years later made President Rutherford B. Hayes sore as a boil during his touring party's overnight stop at the United States Hotel, for which the proprietress charged \$120.

"Never did come back," chuckled the unimpressed miners. "But then, maybe he didn't intend to anyway."

The sisters were treated more hospitably, but extracted only \$168 from the "rich" community, far less than the sums usually obtained in eastern Oregon and Idaho. If they didn't do better elsewhere, Mother Theresa would be quite disappointed. What the pair didn't realize, however, was that those who had gone into eastern Oregon this summer were also having their problems.

Sister Joseph of Arimathea and Sister Perpetua ranged over the Oregon coast, to the Coos Bay lumber ports of Marshfield and North Bend, hoping that the collections might improve. At tiny Empire City they received \$17, hardly worth the effort, but Captain A. M. Simpson, wealthy civic leader of the Coos Bay area, gave them \$60 plus a \$16 railroad ticket which of course they could turn into cash if they didn't need it. And the editor of the local newspaper, perhaps influenced by Captain Simpson, published a story about the sisters, their hospital and its significance, and seemed quite impressed by the fact that St. Vincent Hospital was a place "where all are admitted whatever their color, nationality or religion."

"This is a work which should be encouraged," wrote Editor Gus A. Bennett. "There is no hospital of a kind in the state, and the noble women should receive that recognition and assistance which they deserve."

While the newspaper article wasn't ready cash to satisfy Mother Theresa's bills, it gave the new hospital stature and impetus beyond the immediate

Portland area, thanks to the broad vision of Editor Bennett; and this would prove valuable in time, since the community papers were exchanged and frequently quoted throughout the state.

The sisters moved up the coast to Gardiner, a company lumber town where they collected \$93 which boosted their morale for awhile. Then they swung back inland, managing to gain \$115 at Roseburg in one of the trip's best local collections. But donations from other areas averaged only about \$20. In all, the pair grossed \$850, but with \$150 in expenses, this was reduced to \$700, far below the four figure total they had hoped to obtain.

Nevertheless, the sisters were grateful for any and all donations, for things were being made doubly pressing by the rapid growth of the hospital and the number of needy and indigent who must have care. The hospital was also faced with its first expansion, although nothing very extensive, for a separate building must be erected for patients with contagious diseases. While modest quarters could serve the purpose, it was still another cost item.

Always there were unanticipated expenses, no matter how frugally the sisters tried to operate the hospital. Other close-by begging sojourns were made during the summer, the most successful to the fish markets where \$700 was raised. But they must share these funds with Vancouver and Cowlitz, as those missions were doing with them. It was then that Sister Joseph of Arimathea decided to head upriver, as she'd heard some of the younger nuns were refusing to go into the mines, despite reassurances that there was no danger. Maybe she could give Mother Joseph some help, even though she'd had one long trek this year, for Sister Arimathea was becoming something of an expert at this begging business and found that she rather liked being on the road . . .

Miners like these, and loggers, fishermen and other laborers donated to St. Vincent Hospital and mission projects of the Sisters of Providence.





View of the men's ward, first St. Vincent Hospital. Note the curtained bed sections, giving privacy, and the spittoon in foreground.





The hospital managed to survive that first turbulent year, with a charity patient load already taxing facilities and placing a greater financial burden on the floundering institution. The summer begging tours help immeasurably and Mother Theresa also managed to negotiate a contract with the federal government to care for ill or injured sailors for a fee which added something, although not much, to the income. But largely, it was the will and determination of the sisters themselves that got them through the year.

The hospital could hardly keep up with the demand in this growing Portland, which would more than double in size, to over 17,000, by 1880. The institution must rely on the continued efforts of the St. Vincent de Paul Society and local volunteer women, the sympathies of a segment of Portland, and the sisters' enterprise to "make do" and get by on very little, which was part of their training and their mission in life. Only the hard-headed financiers and creditors of the business community showed little sympathy, doubting the abilities of the sisters to operate a hospital in the black, if at all, for they seemed forever giving away care and meals to anyone.

That December, 1876, the men and women of St. Vincent de Paul staged a highly lucrative bazaar which netted the hospital another \$1,000, although proceeds had to be shared with the mission at Vancouver. The following year, bazaars and other benefits brought \$2,800 to the hospital, and while these sound like very modest sums a century later, they were substantial for that time. It was a different world, too, when governmental assistance even on the local level was virtually non-existent. Later, the hospital and Multnomah County had an arrangement for care of public cases until the county developed its own facilities, but for years St. Vincent Hospital was the chief center for charity cases and the feeding of the poor in Portland.

Still, by July 1878 when she made her annual summary reports to Montreal, Mother Theresa could

proudly show that despite all the misgivings, including her own, the debt had been reduced to \$4,418 on the building.

"Providence is good to us," she remarked.

At the same time expenses continued to mount, including wages which advanced from \$105 the first year to \$1,018.45 for hired help and doctors in the second. The sisters gladly accepted a continuing stream of donations of furnishings and goods—pictures, chairs, carpeting, beds, even pharmaceutical supplies—for normal usage meant that things were always being broken, torn or simply worn out. In the case of repairs, unlike Vancouver, the Portland institution didn't have a Mother Joseph handy with hammer and saw. Instead, they relied on charity male patients and other assistance. Women volunteers helped with needle and thread at repairing hospital sheets, blankets and clothing, and in other hospital functions, for the sisters simply couldn't handle it all, although their numbers would grow during the next few years. At present there were only seven sisters and two coadjutrix sisters, the latter similar to volunteers or "gray ladies" in other charitable organizations, but within the Sisters of Providence community.

By the second year, the hospital had accepted 103 charity patients, while a year later this figure increased to 127 and would rise steadily as the word spread of the care, the kind and gentle ways of the sisters, and the good meals obtained there, with little or no cost to the patient, and available to any outlander down on his luck. This was far more than a hospital; it was a mission project. In 1877-78 the hospital served 11,337 meals to charity patients and 340 to "outsiders." The news got around of the free meal service, so that daily large numbers of men marched to the hospital to be fed by the sisters who asked no questions and never turned away anyone. Later, the sisters were credited with keeping down crime in Portland, for they realized that a hungry man would rob, steal or even kill for food.

Expenses and receipts that second full year bal-



anced out at \$13,926, almost double the first year. When it came to running an institution wisely, Mother Theresa was second to none, and won the admiration of local financiers, even though she was a woman in what was strictly a man's world. Despite her many responsibilities, this amazing woman found time to tend to duties within the hospital, down on her knees scrubbing floors or sitting up all night with a dying patient so her sisters could get their rest, something people outside the hospital never realized. By 1880 and 1881 the books actually showed surpluses of \$1,916 and \$930 for the only time until 1912, as expansions, more rapid growth than anticipated, and unforeseen difficulties which forced the hospital to seek a new location kept the institution annually in the red.

Nevertheless, the surplus helped finance the first true expansion of the hospital, a new wing built in 1880 which added thirteen beds and was called St. Anthony's Ward. Three years later, construction was completed from Mother Joseph's plans for St. Michael's Ward of twenty-five additional beds, bringing the total capacity to over one hundred beds. These units were in addition to the isolation ward built that first year for patients of contagious diseases, especially tuberculosis and smallpox. Mother Joseph, working with the doctors, laid out the plans "to build a little house apart from the hospital," an oversight in the original construction.

"By August," wrote Mother Theresa, "the house was ready, much to our joy. But to our chagrin for more than a month we received not a single case. We began to think that we would have done better if we had had the money to pay off our debt, or to help with payment of the debt. Now there are always patients there whom we would have had to refuse had we not had this house."

This isolation ward, the city's first, was maintained by the hospital for many years until the county developed what was known as "The Pest House" in the West Hills.

Patients came from many sources, some of them

unforeseen. The hospital's arrangement with the federal government for care of sailors included a doctor and medicine for eighty cents a day, twenty cents below the hospital rate, and which Mother Theresa admitted was "low" but nevertheless gave another chance for service. However, when the contract came up for renewal, it was opposed unsuccessfully by the Free Masons.

Expenditures sprung from unanticipated areas, too, including the need for a new furnace and steam pump at a cost of \$428. But the greatest blow came in early September 1878 when fire starting from a patient's pipe destroyed St. Joseph at Vancouver. The hospital was gutted, including most all the furnishings in the basement and on the first and second floors. The outbuildings were saved. The sisters announced that the hospital would be rebuilt as soon as funds were available, and at once Mother Joseph headed for the mining country. But the loss placed additional pressure on the Portland hospital, since it suddenly became the major care center for the entire area, as Vancouver had once been. While it focused attention on its importance to the Portland community, this also meant a greater burden in other ways. The Portland hospital would need to loan its support, financially and in goods and services, to what was essentially its own Mother House. Even fresh fruit, bakery goods and eggs were shipped to Vancouver for the hospital, school, and other mission projects.

"The number of patients grew so quickly that the hospital needed more room," the Chronicles recorded. "As it was too late in the season to build, they converted the barn into a temporary room for patients. Later, the room would be used for drying clothes in winter. Later, too, they bought additional land on which they began a stable."

The sisters' fears that the new "English hospital" (Good Samaritan) would cut heavily into their patient load during those all-important first years of struggle and doubt were unfounded, and quickly subsided. But the fact that the two hospitals were

in the same general area, and opened within a few months of each other, stimulated the feeling of spirited competition.

“We have everything we need,” Mother Theresa declared gratefully. “The poor and the rich speak only of St. Vincent Hospital. The poor, even though many of them are prejudiced against Catholics, come because they do not want to go to the poor house. However, after being with us for several days, they cannot help but say that they do hate the Catholic religion, but really, the kind-hearted sisters are not what the books say they are . . . They are impressed with the hope and spirit of St. Vincent.”

Far more men than women used the hospital, often staying a month or more, enjoying free bed and board. Mother Theresa was difficult to fool, but it was extremely hard to eject anyone who claimed to be down on his luck, under the philosophy of the Sisters of Providence. At one point Mother Theresa wrote: “We cared for 176 patients this year, making a total of 5,776 hospital days. (Note: This averages a month’s stay for each.) All of this number are extremely poor.”

One who didn’t fit this category was their own Father Blanchet, the Archbishop of Oregon, who was now retired and living out his final days at the hospital. He was given a suite of rooms in a new wing. To all the sisters, who were thrilled by his very presence among them, he was a respected pioneer hero of the Northwest in the raw times of the fur trade when this thickly forested land was wild and free, and the matter of whether it would become American or British was yet unsettled. Father Blanchet had been a part of those beginnings, and once when he and his brother, the Bishop of Nisqually, were kneeling white-haired in prayer, side by side, the sisters who saw the scene found it a particularly memorable occasion.

“He appears to enjoy our humble hospital,” Mother Theresa commented. “We are trying to make his retirement as pleasant as we can.”

Father Blanchet resided at St. Vincent for about

two years, dying there in June 1883, and then was buried at St. Paul “where he began his work in Oregon.”

Over the years residence accommodations were made for priests, nuns and even laymen, some of the latter “paying their way” by doing odd jobs about the place. There were always caretaking tasks, including the barn and the vegetable garden, and later farm acres acquired in East Portland. Others were unable to care for themselves or do any work in return; one year the hospital reported “eight old men, five old ladies, two orphans, two members of the clergy.”

“The number of sick increase,” observed Mother Theresa. “The poor and miserable are always with us. They will bring us Heaven’s blessing.”

And God did provide. Patients willed small and large sums, their worldly goods and property to the hospital. Donations came from people of the Portland community, many of them non-Catholic, a fact that surprised and warmed the sisters. Thurman Stanberry, willed the hospital his canteen valued at \$2,000. A man named Welch gave them eighty acres of land “that would be valuable at a later date”; a native of Norway presented the hospital eighty-five acres of land. Another farm valued at \$6,000 was sold to them for \$500, and as part of the deal the owner requested that he be allowed to live out his time at the hospital. And an old miner, facing his last days, willed the hospital \$1,200 in savings. Thus, in addition to being a hospital, the institution became Portland’s first nursing home and care center for the elderly.

Surprising help came from other sources. The sisters needed a horse and buggy for those long trips to the center of town, and for making the rounds of sick calls to private homes in what was becoming a sprawling conglomerate of villages and hamlets spread over a wide area. Joe Holladay, brother of Old Ben, was running the horsecar line and gave the sisters a pass. So did Tyler Woodward, superintendent of the pretentious-sounding Transcontinental





The year after St. Vincent Hospital opened, flood waters poured into downtown Portland, as they often did during the spring runoff. This is Front Street looking north from Stark. The flooding was an ominous sign for the new hospital, for soon the sisters realized their foundation was vulnerable to disaster.

Street Railway Company, when that line was established almost to their door. Thus, a tradition was established whereby the sisters were given free rides on the streetcars for many decades. The conductors would stop the cars "at the least signal," wherever the nuns wished to disembark.

"That was better than a horse and buggy," commented Mother Theresa.

In 1884 the Rev. Louis Verhaag, a missionary priest of the Northwest, presented a bell inscribed "St. Vincent—pray for us," another welcome addition to the mission-like center. Its tones rang loud and clear over the city, as similar bells had done throughout the western frontier, from the deserts of the Southwest and the missions of California to the wilds of Montana, calling not only the devout to worship, but identifying for the tired traveler the location of an oasis and safe haven from the brutal land. Until 1955, when it was removed for expansion, the bell rang the Angelus morning, noon and evening.

The charities of the Sisters of Oregon and the Northwest region extended far beyond the knowledge of the casual observer, and wouldn't be publicly realized until the critical years of the 1890s. The sisters seldom boasted of their good works. But their permanent records show that in one sample year, they served 2,190 meals to impoverished people, issued 7,194 internal prescriptions and another 1,120 prescriptions to "external" patients. The meal service averaged over 4,000 in other years, and as high as 11,337 meals to charity patients plus 340 to "outsiders."

These good women couldn't be underrated, either, for their progressive ideas in seizing every opportunity to improve their institution. Two years after Alexander Graham Bell invented the telephone, it came to Portland in 1878. By the following spring, St. Vincent had telephone service, costing initially \$2.50 per month, although by 1883 the cost had risen to between \$5.00 and \$7.00, with still less than five hundred phones in the entire city. The monthly telephone bill was a small item, but symbolic of how

the sisters did things. Recognizing that they mustn't remain static, the nuns were facing new large expenditures of expansion and additional equipment. The north addition of St. Anthony's wing in 1880 proved a heavy expense, but three years later it was obvious that the second wing, St. Mark's, would be needed on the south end.

More property was required and as a starter, the hospital acquired two lots from Captain George H. Flanders for \$800. However, by 1882 the building was valued at \$30,000 and the land at \$12,000, while the total estimate on equipment, "movable and immovable," reached \$52,400. To make way for the expansion, the hospital purchased the double block for \$24,200. The hospital still had a modest debt of \$3,200, but the sisters were able to borrow \$18,962 from several sources at varying interest rates: \$4,712 without interest, \$1,000 at 8 per cent, \$5,900 at 6 per cent, \$1,350 at 7 per cent, and \$6,000 at 9 per cent. It is intriguing to note that for the same year, in the operating expenses, \$300 was outlaid for wages and \$400 in doctors' fees. In contrast, the records show that for one month alone, the hospital paid out \$1,600 for costs of building the addition.

By the tenth anniversary, the second wing was open, nearly doubling the hospital's original size. The hospital had thirteen sisters plus eight employees, was caring for 210 charity patients and had a yearly operating expense of \$60,485. The wage costs went like this:

Doctors' fees	\$600
Chaplains	\$200
Watchman	\$300
Lady night nurse	\$120
Chinese laundryman	\$240
1 steward	\$ 96 (at \$8 per month)
2nd steward	\$180 (at \$15 per month)

Keeping the institution operating smoothly was no small task. The energetic and fun-loving younger sisters arriving from Montreal needed occasional direction as to their mission in life, and where their duties lay at this remote hospital in an unfamiliar



Mother Mary Theresa came to Portland with three of her sisters in 1874 to take charge of the new hospital. She found it far from completed and was forced to bide her time that winter at Vancouver.

land. The problem of being understood by the American patients and the hospital's relationship to the community were outwardly important matters. Portland was a mixture with many small communities of different languages, yet this hospital was a part of the whole and couldn't afford to be isolated or considered a separate entity.

"Mother reminds the sisters," stressed Mother Superior Mary Godfrey, on a visit from Montreal, "and begs them to speak English at recreation and at meals. In the community room and on all days except Thursdays and Sundays, they should speak English. On Thursdays and Sundays, they may speak either French or English, but the English sisters should speak French on these two days. The language sacrifice will be blessed and will create unity among the sisters. It would help them to acquire facility in English. Some of the younger American sisters do not understand French."

The sisters were encouraged to study and read from the growing library of books on medicine, and to take extensive notes at the increased number of lectures being given by the hospital's doctors, headed by Dr. Kinney. The sisters also relied heavily upon, especially in the early years, a "Little Medical Guide" published almost since its founding by the Mother House of the Sisters of Providence in Montreal and regularly updated to help sisters everywhere care for the sick. The sisters at St. Vincent were urged by Mother Godfrey and Mother Theresa to hold regular assembly meetings "to discuss new things in medicine and better ways to make beds, do the cleaning, put on bandages, air rooms, and so forth." And they were charged to do their utmost to get along with each other and with the nurses and other hired help of the hospital.

"Be gentle and firm with the nurses," the directive said. "Be polite . . . Give them orders as you would like them given you. Avoid speaking of faults . . ."

Hospital rules loosened the old regulation among the nuns of never speaking during mealtime. Mother Joseph had dispensed with this years ago at Fort

Vancouver, realizing that frontier life was in itself lonely and foreboding, and that the sisters needed whatever socializing they could be allowed. Now at St. Vincent, they were permitted to talk at noon and evening meals, for it was believed this would provide additional times of relaxation to ease tensions from the work that was always hard, and always very much all around them. The young sisters, too, were urged often not to neglect their meals, for they needed good health and all their energy in this assignment.

The hospital seemed to be moving ahead amazingly well, and becoming, as intended, a cornerstone institution for both Portland and all of Oregon. Yet a shadow hung ominously about the place, with all its growing success. Mother Mary Theresa recognized it long before any of the others, save perhaps for Mother Joseph and then Mother Godfrey during her visit.

Nobody could have forecast what was happening. When the sisters accepted the site from the St. Vincent de Paul Society, it was considered well removed from the turbulence of downtown Portland. Now within a decade, the rapidly growing seaport and manufacturing center was pushing to their very doorsteps. Sawmills and other industrial plants were crowding and surrounding the hospital, to a point of becoming more intolerable every day. While the hospital continued to expand to keep up with the patient load, Mother Theresa knew they had to get out. But where? And how? In those days, no one ever heard of zoning laws. The city grew helter-skelter.

"The year begins with a worry," Mother Theresa wrote in 1883. "Situated as we are, surrounded by shops and inns and factories, with their noise and polluted air, we need to move, but we have no funds to buy other land. What to do? God will provide . . ."

This was a mounting disaster for the sisters, in their hopes, dreams and ambitions of the future. They were smack in the middle of Portland's major industrial area, on the fringes of what would become known as Slabtown from the tall stacks of slabwood







along the curbsings, so high that driving down the streets was like traveling through endless tunnels. In this age everybody burned wood, the cheapest fuel around; often the smoke pollution from the industrial fires and those of private homes, the hospital notwithstanding, hung heavily over the north end so that you could hardly see the river, the distant peaks or even the nearby mountains to the west.

Mother Godfrey was quick to notice this unhappy situation.

“The hospital is well run,” she reported. “The work of the hospital has grown . . . This astonishing growth of the city and its commerce have made the location of the hospital undesirable because of the noise from the manufacturing houses and because of air pollution.”

Other problems were also emerging. The crowded conditions would limit future expansion. The threat of being hit by flooding waters of the spring runoffs was an annual concern, for Portland and all Northwest lowlands were vulnerable in that season of the year. But a quick move was impossible, for you don't pack up a hospital overnight, like a traveling carnival playing under a bigtop. Nevertheless, Mother Theresa began quietly an intensive search for another building site. She considered many places on both sides of the river, but it took five years of looking, considering and consulting with Mother Joseph and trusted friends and advisers who had the hospital's best interests at heart. At last in 1888, Mother Theresa believed she had found the place, visible from her window. A five-acre tract was purchased from M. G. and Ada M. Griffin about a mile to the west, on a high bench of the mountains that rimmed the city, at a cost of \$21,500, slightly less than the price of the original hospital.

Many of the hospital's loyal supporters, among them local doctors, were horrified at what Mother Theresa had done. Even some of the nuns were critical. The site was remote, on a timbered and sloping hillside densely wooded in cedars, firs, maples and heavy brush. A storm of protest arose and one physi-

cian, looking the Mother Superior directly in the eye, declared angrily:

“No patient will ever go such a distance. You are burying yourself in the wilderness and the hospital will be obliged to close its doors in a short while. You will wish then that you had taken my advice.”

Mother Theresa had heard it all before, when the first facility was opened. The town had grown up around her and was pushing her hospital out within a very few years. She didn't wish such a setback to happen again. Strongly, she stood her ground; and Mother Mary Godfrey reported in satisfaction that “the sisters have purchased a new site on the hill on which to build . . . Already they have begun leveling the land, at a cost of \$7,504 for excavation.”

Periodic business slumps reduced the number of paying patients and raised the charity cases, thus cutting into the hospital's income. It was a moot question how long the new hospital would take to finance and build, working from Mother Joseph's detailed plans. But Mother Theresa felt that at least they had a beginning, and no matter how many years, a start needed to be made somewhere. Nevertheless, the new building would be an astounding undertaking—more than twice the size of the present hospital and its two wings, with 275-bed capacity and some six stories tall of iron, brick, stone and mortar, and with a look to the future of becoming one of the leading health institutions on the West Coast.

Despite the times, the hospital was in a far better position to tackle a new building program than in the 1870s. The center had made solid inroads on Portland life and developed an excellent reputation in the service being done there, especially the manner in which the hospital was run, causing a visiting writer to rate the hospital as “among the best of its kind on the Pacific Slope.” By 1890 while the building valuation had increased only \$2,000, from \$30,000 to \$32,000, the land value had gone from \$12,000 to \$100,000, due primarily to the condition that was forcing the sisters to leave—the development of an

industrial area. But just when they might be able to swing the financing for this huge hillside edifice was anyone's guess, although backing was coming from a number of sources. Then the Mother House directed the St. Eugene Hospital at Kootenay in western Canada "to lend St. Vincent without interest the surplus of its revenue." However, the greatest problem was keeping the present hospital operating, too, with its daily expenses and constant requirements that would continue until the very day they moved onto the hillside.

So here they were, turning back the clock fifteen years to begin once more in what was an unfortunate circumstance. And some of the older sisters, familiar with the story, probably reflected again on whether it might have been better to have gone with crusty Ben Holladay to the East Side, where the land was more open and the ground higher, with less chance of flooding. In any case, it would be a difficult struggle before being safely installed in their new quarters. Mother Theresa wished they could move tomorrow, listening to the din of sawmills in her ears and seeing the high water of Couch Lake licking ominously near their property. She felt that with each passing year, they were existing on borrowed time from some real tragedy.



East Portland looked like this in 1875, when the Sisters of Providence opened St. Vincent Hospital. Transportation tycoon Ben Holladay wanted them to build in East Portland.





While all this was taking place, patients came and went in steady numbers as the medical department unfolded in pace with the advancements of the times, thanks to the progressive thinking of Dr. Alfred Kinney and Dr. Henry Jones. But from the outset, Mother Theresa and the sisters learned that operating such a hospital was a demanding and changing occupation, and that the needs of the patients couldn't always be anticipated.

The hospital hadn't been open very long when it had its first two maternity cases—and no maternity room. The two pregnant women requested hospitalization, and their husbands were perfectly willing to pay. So, the sisters admitted the prospective mothers, Mrs. Ed Scarborough and Mrs. R. Turner. The former, recorded as “wife and child,” stayed eight days and was charged \$20 for “board and medical attendance,” which Scarborough paid in cash. Turner's wife stayed six days. The bill was \$22.75, which he also covered in cash, although his subsequent bills for hospital care were paid in gold.

The dollar-a-day at St. Vincent added—if a patient could afford it—modest extra amounts for medicine. Later the sisters decided they simply must charge extra for all medicine to help balance the books. Most of the early patients were male (the two pregnant women were indeed unusual), as shown in the first record book for the hospital, the oldest medical records in Oregon. By feigning illness, aches and pains, single men learned they could not only get help by checking into the hospital, but also cheap board and room, even free if they claimed to be flat broke. The word also got around the waterfront districts, and was published in a local newspaper, that free booze was to be had, since early doctors relied upon whiskey, brandy and wine. What better deal than this could a fellow get when down on his luck? Thus, patients might overstay their time, taking advantage of the sisters' kindness, and indeed this became a common problem shared by all hospitals before the modern age of crowded conditions, high costs and more stringent regulations.

While full charity patients were admitted without much question, and later the hospital gave care to city and county cases, for which the sisters received part-payment at the going rate, it is noteworthy that the large proportion of the hospital's income came from the day-by-day payments by patients and their families and friends. In time, too, contracts were made with some industries, railroads, mines, and other groups for issuance of “tickets” for at least part-payment of doctors' and hospital bills, in what was an early form of industrial hospital “insurance.” Much effort went into the public bazaars, benefits such as a show at the Marquam Grand in Portland, the begging tours, house-to-house canvassing by the nuns, and other methods of obtaining public support, but in the first thirty-seven years of the hospital's operation, only about \$10,000 was obtained from public benefits and \$10,000 from alms, while seventeen people left \$31,219 in their wills. Thus, most all the income was from the patients.

The first hospital was a very modest undertaking, almost primitive by today's standards, and its charges and expenditures seem very nominal. Yet it was all very extensive, and a bold stroke nearly a century ago, when a man felt secure with just a dollar or two in his jeans. Still, the hospital always needed ready cash in these years of struggle to survive. Income was slow, so it is no wonder local creditors howled loudly and a few times even threatened the hospital with foreclosure, in what were grim days for Mother Theresa.

The difficulty was that Mother Theresa was methodically trying to pay off the basic obligation for the hospital building as soon as possible. In June 1875, just ahead of the opening, \$14,036.64 had been paid on the debts. Significantly during the first year, from all its expenses and the load of charity patients, she was able to pay another \$7,780.67 for a total of \$21,817.31 by July 1876. Some months this amounted to little more than \$100 and a few months around \$500, while the highest amount was in September 1875 when \$2,259.15 was turned over. At the



other extreme, that October nothing was paid on the debt when she was faced with a bill of \$349.55 for medicines. The following month, also, only \$130 was paid on the building, but there was an outlay of \$181.70 for hospital insurance, including the stable. So it went . . .

Hospital costs by the month were therefore held to a minimum, primarily because the nuns and volunteers did most of the work. Much of the outlay went for supplies of various kinds. Operating expenses that first year totaled \$15,359, but this includes the amount paid on the building which was more than half of the grand total. The operating expense, minus the debt payments, was only \$7,579. Therefore, the actual expense for operating the hospital per month was around \$600-\$700. In October 1875, when nothing was paid on the debt, the expenditure was \$732; the following June in a like situation, \$614.

What were the expenses? The ledger page for July 1876 is typical: \$170 for food, \$48.25 building and repair, \$136.88 furniture, \$26 animals, \$181.50 wages, \$7.90 fuel and lights, \$7.25 clothing, \$67.25 dispensary, and \$46.40 for sundries, totaling \$691.43. Expenses for other months ran the gamut from hay for livestock to syringes and rubber matting, cleaning a chimney or buying garden seed to doctors' fees from \$25 to \$50, and a load of wood costing \$75. Taking another page at random, for May 1880, with a month's total of \$582.75, the cash outlay included such items as \$150 building-repairs, \$41.80 furniture, \$211.92 food, \$180.75 servants' wages, \$18 fuel and lights, \$13.35 clothing, \$26.40 dispensary, and \$15.50 sundries. Itemized individual costs included calico \$10.85, meat \$100, bread \$29.52, groceries \$12.65, potatoes \$2.50, freight \$2.50, washing (laundry) \$4.00, spices \$6.25, telephone \$4.35 and wine \$20. By the time St. Vincent moved in 1895 to its new location in Portland's West Hills, the monthly costs had increased several times. For June 1895 the total was \$2,455.85, of which \$404.90 went for food and \$207.05 for wages.

Patients reflected all walks of Portland and Ore-

gon life at that time. In the first year, only brief descriptions accompanied a patient's name, such as tinsmith, fisherman, broom maker, sailor, laborer, stonecutter, shepherd, steamboat hand, carriage maker, carpenter, miner, saloon keeper, blacksmith, shoemaker, cooper, woodchopper, harnessmaker, spice manufacture, sailmaker, peddler, expressman, moulder, and occasionally a clergyman, schoolmaster, actor or interpreter. In other early years the records included servant girls, cigar dealers, constables, coachmen, customs clerks, umbrella makers, brewers, liverymen, tanners, boxmakers, cigar dealers, a speculator, and one man listed only as "book."

The hand-written account books and medical records, the latter often done in Dr. Kinney's own script, are in easily-read penmanship, but the latter are brief indeed compared to today's extensive medical records kept on file for each patient. Listed were the names of the patient, country of birth, age, sex, residence, religion, profession or trade, date of entry, diagnosis of disease, discharge date, date of death, and "remarks." Often only last names were used. The hospitals' range reflected the variety of Portland and Pacific Northwest life, stretching from booming Oysterville on the Washington coast to Idaho, and Cathlamet to Yamhill to Gervais; nationalities or places of birth included England, Sweden, China, Germany, America, Canada, Ireland and Norway, all on a single page.

Under "remarks," the sisters often wrote personal comments, such as "poor man but honest," "very poor," "no pay," "poor but very nice," and "has large family but very poor." On the discharge line were such notations, as "gone to Italy," "he ran away (no date)," "left without word," and "she has gone." Opposite the name of one of the two men admitted before the hospital was dedicated, an Irishman from Salem, was the inscription that he was born in 1836 and crossed the plains in 1853 at the age of 17. But there was no record of his ailment. That was about the extent doctors and nuns knew about many of the patients.

As might be expected of this seaport and industrial center, many cases were for accidents on the job or in the streets and saloons, from gunshot and knife wounds to fractures. Other cases were for lumbago, variola, toothache, torpidity of the bowels, heart disease, gangrene, consumption, malaria, alcoholism, fractured spine, syphilis, nervousness, fever, back and stomach troubles. There was a case of "typhoid pneumonia" and another classified as "insanity," followed by a notation "asylum," probably indicating the patient was removed to a private mental hospital established by an early doctor on the East Side.

Communicable diseases were a major portion of the patient load, among them such frightening illnesses as scarlet fever, diphtheria, meningitis, mumps, measles, erysipelas, typhoid and the dreaded smallpox, the scourge of the frontier West which had so panicked the Indians on the plains. Typhoid cases demanded sometimes being hospitalized for fifty-eight days. The hospital's first autopsy in December 1881 revealed cancer of the stomach and liver. Early traffic accident cases involved horse-drawn vehicles; the first automobile accident victim wasn't recorded until 1908.

During epidemics, the small isolation unit wasn't sufficient, so other outbuildings on the property were utilized for the cases. The sisters cared for these patients at great risk to themselves. Quarantine laws were in effect, so homes were posted with signs warning of the disease to curb exposure and spreading. Later, the county operated its own isolation sanitarium above Canyon Road, where the Portland zoological gardens are now located. When a smallpox victim came to St. Vincent Hospital in February 1893, an epidemic was sweeping the city. The sisters were unable to take him to the county isolation sanitarium, as the law required, because the roads were impassable. Sister Mary Conrad, mother superior at the time since Mother Theresa had become the provincial superior, volunteered to care for him herself in the "little house." Within a

week she, too, had contracted the disease.

Portlanders with such a communicable disease fought going to the "pest house," as the county isolation unit was called.

"People felt that if you went to the pest house, you were a goner," one longtime Portlander remembers. "They even had a graveyard right next door."

The sisters didn't wish to send Mother Mary Conrad there, but somehow to care for her themselves. Mother Joseph suggested she be transferred to a house on the Vancouver farm, but the doctor who was sympathetic to the sisters' feelings feared that she might be discovered. Spiriting the ill Mother Superior out of Portland, she was taken to a room above the laundry at the Vancouver hospital to be under the care of Sister Paul. During the three weeks she was there, the sisters were concerned not only for her recovery but that authorities might find her, and also that the disease might spread into the Vancouver facility. However, they chose to take the risks and saved her life.

Smallpox was very contagious and could spread like wildfire. Early westerners had wiped out Indian tribes such as the Blackfeet by trading them blankets used by smallpox cases. People working in Portland laundries took the disease from the clothing they handled. At St. Vincent the situation was bad. The room occupied by the first smallpox patient was thoroughly disinfected, but ten days later, two other patients, Genevieve Lomlevire and Agnes Bradley, broke out with it, then a coadjutrix sister, a pastor and an employee. Three patients were brought to the hospital and kept several days before the disease, in a mild form, could be diagnosed by the doctors. They were promptly removed to the pest house by the city physician, Dr. J. C. Zan, and the rooms disinfected. The hospital refused new patients, but was not quarantined because so few persons were exposed and the disease was in a mild form.

Mother Theresa feared the hospital might have to be closed entirely. The sisters and the chaplain re-



sorted to prayer, and their prayers must have been answered, for no more cases appeared and the hospital continued to operate. However, the smallpox crisis came nearer than any of the money lenders to closing down the hospital.

The hospital was fortunate indeed to have the support, services and great knowledge of Dr. Alfred Kinney, one of the state's best physicians and surgeons. Dr. Kinney was a native Oregonian, born in 1850 in Yamhill County and the son of wagon train pioneers. That was an important credential in getting along in the Beaver State at the time, and indeed well into the twentieth century. His father operated a large flour mill at McMinnville and another at Salem, and also a woolen mill, with branch offices in San Francisco and Liverpool.

When Alfred Kinney decided to enter medicine, he traveled to New York to attend Bellevue Hospital Medical School, training especially in the surgical department. He gained experience in an unsanitary charity hospital on Blackwell Island which handled some six hundred charity cases a winter, but returned home with tuberculosis which was then called "galloping consumption." He cured himself that summer by sleeping in the open in high mountain country of the Three Sisters and Mount Jefferson, and by stuffing himself with cod liver oil.

Nevertheless, his training at Bellevue Hospital Medical College had been the very best, for he'd studied and worked under the famed French physician, Georges Clemenceau who was also teaching French classes to young women of a school at Stratford, Connecticut. Kinney and his brother, Augustus C. Kinney, persuaded Clemenceau to instruct them in anatomy and "modern" laboratory techniques. These sound methods, and also a brush with the French language, were brought back to Oregon. Kinney practiced successfully at Heppner, Salem, Portland and Astoria, where he finally settled, and where in 1880 the Sisters of Providence opened their second Oregon hospital. As a prime mover for a hospital for Portland, Dr. Kinney was quite aware of the

great need of the growing seaport. And in all probability, his association with Clemenceau drew him to the French-speaking Sisters of Providence.

While some local doctors opposed establishing a hospital beyond their own limited facilities a growing number recognized this was the sensible course to follow. The sisters learned that their institution was able to attract medical men of character and skill to the facilities, despite the fact that Portland's second hospital was also courting local physicians. The nuns had demonstrated at Vancouver their capabilities to operate the hospital efficiently. Also, they had the endorsement by Dr. Kinney and shortly thereafter, Dr. Henry Jones. But the competition over doctors was of much concern, for a decade later the "English hospital" was able to establish a close relationship with the newly-formed Oregon Medical School by offering land on Good Samaritan grounds for a small two-story frame building which was the school's first home. However, by then the sisters had developed their own strong ties with local doctors and Dr. Kinney, who was first president of the State Medical Society and helped institute the State Board of Health, would always remain their friend.

Although much of the medical groundwork was laid by Dr. Kinney, Dr. Jones as the first chief surgeon was influential in shaping the professional standards of St. Vincent. Dr. Jones had attended Bellevue ahead of Dr. Kinney, giving the two men many common bonds. He came to Oregon in 1874 as a military surgeon attached to Fort Stevens. He'd served in the Civil War prior to becoming a doctor, and had been at Gettysburg. But six months after arriving at Fort Stevens, Dr. Jones resigned and moved to Portland where he became interested in St. Vincent, serving as chief surgeon for eight years. Then he shifted his efforts to the new medical school as professor of clinical gynecology, along with his brother, Dr. William Jones, who was on the medical school faculty in clinical surgery.

The nuns were quick to see their own limitations, especially in the medical department; and the sisters



The hospital's nursing school was urged by Portland doctors to keep pace with community growth, and in turn growth of the hospital. Portland suffered a dearth of trained nurses before the school was established. Rosa Philpott (center) who was the second graduate then began teaching other students, including this class of 1896.





The medical staff of St. Vincent posed for this photograph in 1895 when second St. Vincent Hospital was opened in the West Hills.





were equally receptive to suggestions by Dr. Kinney and Dr. Jones. Few nurses could be hired because of the lack of funds. Volunteers assisted with the endless tasks that confronted hospital personnel around the clock, day after day, week after week. Dr. Kinney trained the sisters on how to dress wounds, administer chloroform which was the usual anesthetic, give medicines, change beds, and the many ways of making a patient comfortable in hopes of getting him back on the road to good health. Donations of old bedding, towels, and other linens were accepted, and the nuns boiled, cut, tore and rolled bandages. Cleanliness to an extreme was the watchword, and certainly Dr. Kinney had a prime experience on its importance, but conditions were nevertheless primitive by today's standards. Unbleached gauze was purchased by the bolt and sea sponges were used in the surgeries along with catgut for closing incisions. Hands were washed, but nobody wore gloves.

Two male nurses were employed for subduing struggling patients. There was also a matter of propriety in the care of male patients "in so corrupt a country." As more doctors began using the hospital, special lecture sessions were given to keep the sisters and the nurses abreast of the latest in health care. In 1886 the medical school began clinical lectures at St. Vincent, and the hospital enjoyed close ties with the school through the faculty members who also used the facility, which was a two-way advantage for both institutions.

Within three months of the opening, the hospital was full, most of them Dr. Kinney's patients. The patient load forced the need for more help. Seven years later, hospital personnel had grown to eleven sisters, two coadjutrix sisters, and twelve employees. The hospital staff performed 36 surgeries, including 19 amputations, and set 20 broken bones. A total of 2,032 patients' prescriptions were filled plus 750 for "externs" or out-patients.

Sister Peter Claver came down from Port Townsend, Washington, to set up the hospital pharmacy. She had trained at Montreal in a field which was ex-

panding rapidly and becoming more complex and demanding. Within a few years Sister Peter acquired a knowledge, both theoretical and practical, that made her the envy of many physicians. In 1869 the Sisters of Providence published a book of medical material, *Materia Medica*, edited by Sister Peter Claver. Then she came to the Pacific Northwest to help start St. Vincent, working closely with Mother Theresa, and later traveled from hospital to hospital establishing pharmaceutical departments. She also helped develop uniformity in the treatment of the sick and in the training of the sisters and nurses. Doctors were astonished at her skill and her knowledge.

However, progress eventually passed her by. Updated techniques and new medicines and prescriptions were substituted for those which Sister Peter had used for so long. Eager to keep abreast, she accepted the new ideas. Nevertheless, she remained of the old school, and from time to time came to the assistance of patients who had been unable to gain satisfaction from local doctors. Resorting to her antiquated recipes, Sister Peter was often able to cure or relieve their conditions, which must have given her some inner delight.

Like Dr. Kinney and Dr. Jones, Sister Peter Claver had nevertheless pointed the floundering hospital in the right direction. Over the years other doctors also made their distinct contributions from their special interests, among them Dr. E. F. Tucker who joined the staff in 1890 and became a leader in gynecology and obstetrics. Other early prominent physicians practicing at the original St. Vincent Hospital included Drs. William Jones, A. D. Bevan, C. C. Strong, A. C. Panton, Holt C. and George F. Wilson, K. A. J. Mackenzie and Otto Binswanger.

When the hospital was first established, laboratory analysis was almost non-existent in the ordinary practice of medicine. Later, a small room was set aside for doctors wishing to make special tests, although little was expected from such procedures. Early doctors relied generally on clinical diagnosis



and guesswork rather than what might be learned in a laboratory. The arrival of Dr. A. E. Mackaw in 1889 brought a turn of events, for he attempted to interest his colleagues in the then-new germ theory. But new ideas are often accepted slowly, so that it is significant that even when the second St. Vincent Hospital was opened, laboratory facilities still weren't provided, which was on a par with other hospitals of the area. However, the importance of pathology was advancing rapidly now, so that in 1912 St. Vincent established the first pathological department in the region under the direction of Professor David N. Roberg of the University of Oregon Medical School. The forward-looking step delighted Dr. K. A. J. MacKenzie who had been on the St. Vincent staff.

"It is comforting for me to think," he wrote Sister Alexander, superior at the hospital, "that St. Vincent Hospital is the first in this territory to take this advanced step, which is now regarded as essential to modern hospitals."

It was in such matters the Sisters of Providence demonstrated so many times their willingness to change and progress, if the change were necessary to benefit the hospital and its patients in what was becoming rapidly an increasingly complex profession. Doctors defended the Catholic hospital from critics who alleged that patients of means received better treatment than did the charity cases. The doctors observed that "at St. Vincent, they see no difference in care given the rich and the poor." Certainly the sisters had every intention of doing the utmost for all patients. Such criticism was rejected as being merely anti-Catholic in nature. If anything, the charity cases had the edge, since these people were traditionally the foremost cause of the Sisters of Providence, and this fact was stressed time and again by the Mother Superior and the Mothers from Montreal.

"They (the poor) should be your prime concern," stated one visiting Mother Superior, "since it is for them that we give ourselves to Christ . . . The most indigent . . . the most miserable . . . have a special

right to your devotedness. If they are guilty of theft or intemperance, they have special need of your help. Treat them gently and compassionately. Be simple and truthful and kind. Never correct anyone in the presence of another. Be polite . . ."

The hospital and the doctors received letters often from former patients expressing their appreciation for the care given by the sisters and the lay workers. Years later, Dr. Kinney reminisced to a nephew hospitalized at St. Vincent that "there have never been better nurses (than the) ever attentive and sympathetic sisters."

The alertness of this amazing corps of nuns who were now operating one of the most astounding health care institutions of its day in the Far West surely spelled the difference. Once a very drunk man was brought to the hospital and placed in the basement special care area where he could be watched all day, for his mind wandered and he threatened to take his life. By evening he seemed much calmer so his nurse, making a last check, decided to go to bed. Reaching her quarters on the top floor, the nun suddenly felt uneasy. Despite her weariness, she made the long trek down the stairs again, knowing she would have to reascend them once more. Arriving in the basement her eyes filled with horror. The fellow had a rope around his neck and was trying to hang himself. The sister called for help and he was again subdued, but had she given in to her own tired feelings, he might have died.

The patient load brought about a critical need for more nurses. They were hired from the community, but this supply was very limited. At one time, only one trained nurse lived in the entire town. The hospital also had a number of the "coadjutrix sisters," essentially a volunteer group in the hospital's formative years known as the Third Order of the Servites of Mary, but who by 1900 were approved by Rome as part of the Sisters of Providence community. Both the sisters and the doctors, who certainly needed to be accommodated for the best possible function of their work, recognized that in the chang-

ing medical picture, more well-trained nurses were needed, and in continuing numbers. The sisters thus embarked on one of their most ambitious projects, the establishment in 1892 of a nursing school.

The sisters at the hospital, many of whom by now had from fifteen to twenty years' nursing experience and had served under some of the leading physicians and surgeons on the Pacific Coast, helped train the first student nurses as their "faculty." Sister Andrew, in charge of surgery, was sent to New York for special training at a Presbyterian Hospital. When she returned, she was placed at the helm of the school. Three young women volunteered to take the training under Sister Emerita as superintendent; and two years later, in 1894, Agnes Johnson "the first nurse to graduate here, finished alone. The school is just beginning . . ." Shortly a second girl, Rosa Philpott, completed the course.

"We came to the decision to conduct the nursing school," the Chronicles recorded, "not because of rivalry with the other hospitals of the city, but rather to respond to requests of our doctors who showed us the necessity of having the school for its own renown and for the growth of the hospital. The doctors seconded our efforts to train good nurses. They gave them lectures twice a week over and above the other instruction our students have. It was likewise to our interests to have the school. Our training school now has nineteen girls, a class sufficiently large to answer the needs of the hospital. We have many applicants, from which we choose those we consider have the talent and aptitude to succeed. To be a nurse in this country is not considered a menial occupation, rather an honorable profession. Up to now we have had no difficulty. All our students have been good, intelligent, devoted young women who have performed their duties with satisfaction. Everyone admires their unity and their eagerness to help each other, even as members of a family do."

The nursing school became very popular, one of the early schools of this kind in the nation attached to a religious order. It grew so rapidly that by 1907

a fund of \$75,000 was approved for a separate building for dormitory and classrooms on a knoll to the rear of the hospital and dedicated to Mother Mary Theresa. Two years later the nation's first school of anesthesia was established by Miss Agnes McGee, continuing until 1956 when changing trends and the movement of medical anesthesiologists into the field of the nurse anesthetist closed down the department. And by 1930 the nursing school had grown to such proportions that new accommodations were necessary, bringing about construction of a home for the student nurses on the site of "The San" which was the hospital's isolation unit in earlier times. The nursing school later became affiliated with the University of Oregon Medical School on Marquam Hill, and lastly emerged in 1934 as a full college of the University of Portland with a Bachelor of Science degree in nursing upon completion of the four-year course. By then, too, the school had trained thousands of young women who ventured far beyond the local scene to serve the sick of hospitals and other health care institutions, or as nurses to individual doctors throughout the world.

But this and far more were well into the future. And right now in the early 1890s Mother Mary Theresa and the other sisters in charge of St. Vincent's welfare were faced with a hospital that was again bursting at its seams; and a plot of hillside land where they longed to build again, hopefully before they were either crowded out or flooded out of their present location which once was said to be too far out of town, and now wasn't by any means far enough.



The 1894 flood disrupted business and industrial life in Portland and throughout the Columbia River area. This scene is on First between Stark and Washington. The flood convinced Mother Mary Theresa that the hospital must be moved as soon as possible.





It was most ironic that after all the years of hard work poured into the first hospital, the sisters must do it all again, rather than growing forever from the cornerstone placed almost two decades before on the block bounded by Twelfth, Marshall and Northrup. Now a certain urgency was in the air.

Mother Joseph spent many hours hunched over her drawing board at Vancouver, laying out the preliminary design for what would become one of the most astounding hospitals ever built on the Pacific Coast. The goal was a massive building to last many generations and able to accommodate and adjust to the many great changes already coming about in the field of medicine and health care. In Mother Theresa's vision was an edifice of Italian Renaissance design, spacious enough to accommodate the expanding city with its equal demand for care, and safe from floods and pollution. All told, it was a far more extensive project than the hospital of 1875; but then perhaps not so, since the pioneering sisters had been faced with many obstacles now an accepted part of life in the Oregon Country.

The new hospital would be a very costly item, nearly \$300,000 by the estimates, and it would take years to complete. Meanwhile, the nuns must continue operating their present hospital at full steam. Furthermore, times weren't the best for beginning such a project. During each financial stress, the load of charity patients at St. Vincent increased many fold, as did the feeding of the poor. This always placed increased burdens on the hospital community which now would deepen considerably, where begging tours and public benefits wouldn't suffice. The Mother House was well aware of the unfortunate circumstances that were forcing St. Vincent to move, and therefore sought other means among Sisters of Providence institutions to give the Portland center financial assistance.

Internal changes were also taking place within the Sisters of Providence community which had an effect on the building program. The Northwest province was broken into three—Oregon, Washington and

Montana—and Mothers Theresa and Joseph were given additional responsibilities on a statewide level in the development of other hospitals along the northern West Coast, while administrative duties were delegated to other sisters. Sister Mary Conrad was the first to succeed Mother Theresa at St. Vincent, but after her bout with the smallpox, she was replaced by Sister Irene who was the first superior of the second hospital.

With these changes and the complications of the huge Westover building, Justus F. Krumbein was engaged as architect to develop Mother Joseph's plans, and D. F. Campbell as "clerk of the work" on the construction project. Right away, the builders, Ryan and Wilson, were faced with problems of slippage on the hillside so that a stout retaining wall had to be erected. And as before, the problem was always where to obtain the funds for each step in what appeared to casual onlookers and critics as an overly-ambitious undertaking, perhaps far more than the sisters could handle. At one point the excavator threatened to place a lien on the property, claiming that he had been shorted on his bill of \$7,442.16 by \$1,307.98; but a suit over the matter which reached the state supreme court was decided in favor of the Sisters of Providence when it was disclosed that, although there had been a balance due, the sisters had fully met the obligation and that at a later date, the excavator had returned the due amount, then filed an appeal for collecting \$3,954.87 including \$1,000 in attorney's fees.

The tightness of the times spelled more hardships and self-sacrifice for the Portland mission. The sisters tried to reduce expenses wherever possible; even Mother Theresa, the hard years beginning to tell on her health, could be found mornings on her knees, scrubbing the entrance steps. When she was forced to borrow money on one particular occasion, the broker warned her emphatically that she must repay the amount in full, with the interest, on a designated day. When the deadline approached all too rapidly, Mother Theresa realized she couldn't



meet the interest, let alone the principal. In desperation she appealed to Montreal, receiving notice that the money would be forthcoming, but not in time to make the deadline.

Mustering her courage, and taking another sister along for moral support, she faced the broker in his downtown office. She would need a two week extension.

“No!” he shouted. “Not one day! Not one hour! Not one minute! Either you shall have the money in my office by three o’clock next Tuesday or I shall close St. Vincent’s doors.” Then he stalked from the room.

The two nuns returned in despair to the hospital and broke the unhappy news to the other sisters. The stunned sisters were all in tears, for there seemed little hope that either the money would arrive in time from distant Montreal or the lender would have a change of heart. And if St. Vincent closed, what would happen to all the poor patients? Perhaps, it was suggested, God didn’t wish them to have a hospital here. Mother Theresa reassured the sisters that she didn’t think this were true, but whatever the outcome, it must be accepted.

“If God wishes us to discontinue His work here,” Mother Theresa said, “then we must bow to His will. But I do not think He wishes us to leave until His work is finished.”

On the fateful Tuesday morning when they were to confront the broker again, a messenger arrived with a fat envelope. Mother Theresa ripped it open; inside was enough money not only to cover the debt, but to assist the hospital over a great many other difficult days. She and her companion rushed joyfully to the broker’s office. Then with much dignity, trying to contain her feelings, she placed the full amount in his hands. The man turned pale and acted greatly embarrassed, for he was against Catholics and one of their major obstacles in the business community. He also recognized when he was soundly beaten, that these determined ladies would have their hospital and couldn’t be run out of Portland.

Rising, he extended his hand and said:

“Mother Mary Theresa. I have fought against you since the beginning of your work here. More than once I have hindered your plans. But from today, if you will permit me, I will be your friend. I will fight as strongly for your interests as in the past I have fought against you.”

The reaction was strange, and unexpected. The broker was doing an about-face. In an odd way, the sisters had gained the favor of the hard-headed moneychanger whose respect they’d won, and only could win, through payment of a debt on schedule. And the man kept his word. For the remainder of his life, he gave much support to the hospital and was looked upon as one of its major benefactors.

Several thousand people gathered on an overcast day in September 1892 to witness the laying of the cornerstone for the second Portland St. Vincent Hospital. Public dignitaries joined clergy, doctors, hospital officials, volunteers, and the Sisters of Providence to dedicate and bless this most symbolic section of the hospital foundation, containing records from the earlier cornerstone and the much-beloved old building far down the hill toward the river—records showing establishment of St. Vincent by the Vancouver sisters in 1875, copies of the local newspapers, rules of the St. Vincent de Paul Society, medals of Saints and Pope Paul IX, the act of incorporation of St. Vincent, names of the sisters attending the hospital and the province of Oregon, and the sermon delivered on that memorable day in 1875 by Father Fierens who would die the following year before witnessing completion of this second hospital which he had helped bring into being. These artifacts and many others would not see the light of day as soon as at the first hospital, not for three-quarters of a century, for this stout cornerstone held in place by a derrick was being solidly set into the foundation wall of a location the sisters hoped would be permanent. *The Oregonian* forecast that “the hospital will be the finest on the Coast and while its erection reflects credit on the Catholic Church, under whose



The second hospital had a spectacular view of Portland, the rivers and Mount Hood, and in turn the landmark hospital could be seen from most any part of the city. This is the city in the late 1890s, shortly after the hospital moved from Twelfth Street.





On a high slope of the West Hills, along Westover Road, the second St. Vincent Hospital was erected, to become a familiar Portland landmark. The huge building was designed by Mother Joseph. This photograph, about 1910, shows the hospital before addition of the south wing.



auspices it is being built, the whole city, regardless of creed, will have reason to feel proud of it.”

Archbishop W. H. Gross who *The Oregonian* reporter pointed out “spoke for three-quarters of an hour” reminded the crowd that hospitals were an achievement of the Christian religion, and that non-Christian countries had (at that time) no such institutions. And Mayor William S. Mason, reflecting satisfaction that this event was occurring during his administration, predicted eloquently that the structure to be built here “will in architectural beauty be an ornament that our city can well feel proud of, and yet that pride is overshadowed when we realize the use to which it is being dedicated. We are impressed with a reverence and respect for the inspiration that prompted the building of this hospital.”

Surely by its location alone, 220 feet above the basic city at the head of Glisan, Hoyt and Irving Streets, the place would be a startling landmark, visible from most any part of town. But they were a long way from being into it, as Mother Theresa realized all too well, and a cornerstone was hardly a completed building. This was a dream of the future, and Mother Theresa hoped she would live long enough to realize the dream.

Times were very hard that winter and by spring, the financial trouble was general—“no work, no money, privations for everyone.” The sisters found themselves daily feeding hundreds of hungry men. The stream to northwest Portland was almost like the change in shift in a lumber town. Mostly, they were men without jobs, without funds, without hope.

“The financial crisis of this year has broken down class distinction,” Mother Theresa commented. “Unemployment has brought people unaccustomed to poverty new experiences in hunger and cold, and previously unknown privations. These circumstances brought many to seek assistance at the hospital. Although St. Vincent has always befriended the needy, never before has it had so many come here for help.”

A prominent local justice, recognizing the great need to feed people in this unhappy time, rented a house at Seventh and Flanders where he and other volunteers could receive people. Being a Catholic, he was able quickly to gain the support of Archbishop Gross. The vacant building was outfitted for efficient dealing with the crowds. Soon the sisters were involved, since the program was duplicating their own effort and this would remove the food line from the hospital where the numbers were becoming almost too many to handle with any efficiency and keep up the care of the sick.

The eating house served as a depot for donations, too, for the sisters were also distributing clothing and blankets. Four sisters were assigned to the work—Sisters Dortha, Mary Frederick, Ethelberg and Pareil. An appeal for food donations was made in the newspapers and many gave generously—merchants, workmen, hotels, restaurants, professional men. Each morning throughout that terrible winter someone made the rounds to pick up contributions, then bring them to the house on Flanders Street. For the first time in the West a “soup kitchen” similar to those established by the Mother House of the Sisters of Providence in Montreal was in operation; and the nuns noted with satisfaction that the house was painted yellow, a sign reminiscent of Mother Gamelin’s yellow house in Montreal where their community had its beginnings in 1843.

The daily menu consisted at least of soup, coffee and bread. When donations warranted, stew, hashed meat, potatoes and even vegetables were served. Within a short time three thousand meals had been doled out. The largest single day was on a Sunday when 326 meals were eaten. Despite the huge crowds, visitors noticed that the dining rooms and kitchen were kept spotless. After eating, the men were asked to contribute some work about the place and most did, splitting wood, sweeping floors, emptying garbage containers, and doing other jobs to keep the place clean. Some even took on tasks at the hospital. The sisters also had a register for the



men seeking employment, in case any jobs were open.

The hard times continued throughout the country. In the East, Coxey's Army was being formed by James S. Coxey, an Ohio businessman, for a march on Washington to demand action in public works programs and relief for the unemployed. Portland's jobless decided to organize, then head east to join in the national protest which was structured like a military corps with commanding officers. Talk ran high around the eating house as they prepared to leave the city in what seemed their only recourse to gain the attention of President Grover Cleveland and other national leaders in Washington, who so far had refused to act for the jobless and hungry. Similar companies of Coxey's Army were forming in other parts of the country. Governors of the various states had tried to reach the President's ear on behalf of those out of work who said their only aim was to find employment "for whatever salary they could get." But all requests were rejected, and the federal administration failed to respond.

Mother Theresa and the other sisters were well aware of what was happening, as they heard the talk while feeding the men. Some of the words and threats were frightening. Local leaders contacted the railroads, attempting to get reduced fare for the local contingent, but the railroads refused "even if they rode in baggage cars."

Then the Portland unit broke up into smaller groups of 200 to 250 men. Plans were laid to "seize a train at any cost." They got a train as far as The Dalles where troops halted them and forced Coxey's Army to return to Portland. The jobless were made prisoners. However, Governor Sylvester Pennoyer, sympathetic to their plight, ordered the men turned loose, but made no provision for their care. They were thrust right back on the streets, with nothing solved.

"Thus, Coxey's Army came to seek help at our depot for the poor," related Mother Theresa. "We saw faces with suffering and anguish, faces of those

who had known better days, a painful scene re-enacted daily. We have as many as eighty a night. We serve four hundred meals a day. Providentially—and to the surprise of many—we never lacked food. The police officers would come at 2 P.M. each day to inquire if all was going well. They would say, 'My sisters, you don't have enough to feed everyone'. However, all received something. Soon things seemed to multiply. This went on from January 11 to May 3. We provided 33,825 meals for people in distress this year. How did we do it? We gave out clothing and blankets. Often we did not know where to turn, but Providence always provided."

Many jobless took the meals because they had no other choice. Of course, freeloaders were among them. One man, offered work by Mother Theresa, turned her down flatly, even though he'd been raised in the church and would be assisting those who were helping him and his friends. Later, the same man became very ill, was for a time near death, and then recovered under the hospital's care. He had a sudden change of heart and from then on was a willing aide to the nuns, becoming one of their male nurses.

The sisters did too good a job, in the view of city officials. The large feeding station was drawing too many men to Portland from outside the immediate area, just to have good meals. Officials feared it might create a riot atmosphere and bring in a criminal element, and that too much burden was being placed on the community to feed all these thousands. Adequate police protection was impossible. The city ordered the soup kitchen closed down, a blow to the sisters who saw only the need of keeping people fed and clothed in a time of crisis. Undaunted, they ignored the order, continuing to feed the poor quietly at their hospital while, at this very time, the area and much of the Columbia basin were facing a natural disaster that made thousands more homeless and wiped out their possessions.

That spring of 1894 Mother Theresa, accompanied by Mother Mary Antoinette, headed upriver on one of the periodic trips she made to the inland

missions at Spokane and Kootenay. The sisters didn't want her to go, for the rivers were ominously high and the trip perilous. But she was determined and it was useless to argue with her. The Kootenay section was particularly dangerous from a surging runoff of the snowpacked mountains. Leaving Jennings Landing, the steamboat fought the current for five hours, trying to make progress upstream. A cable snapped with a frightening sound, and the ship spun out of control. There was danger of foundering, or being sent crashing against the shore line. But the skipper was a skilled navigator, returning his ship with its terrified passengers to the safe landing in half an hour.

The two nuns made it to Great Falls, Montana, but were detained deep in the inland Northwest for several weeks, unable to get back to Portland. All the rivers were now over their banks. Mother Theresa became increasingly restless about conditions on the lower river and what might be happening around Portland. The hospital, she knew well, was quite vulnerable to high water. Sister Mary sent the following telegram, still in existence in an old scrapbook the early sisters kept about their hospital:

*"Has water reached the hospital. Mother Theresa much worried."*

And she also wrote Mother Joseph:

"I have followed the daily papers with anxiety ever since the flood began . . . The tears of Mother Mary Theresa who mourns over the trials of her sisters have contributed much of my thoughts of you. It is right to tell you of her anxiety."

There was good cause for concern. The water was rising rapidly all along the lower river, seriously threatening Portland, Vancouver, and all other river communities. In two days near the end of May, flood waters reached Portland's Front Street and were still rising. By May 31, the water was 29.1 feet deep at the foot of Stark Street, while it was five feet deep at Third and Stark. Lives were lost and buildings swept away in what would rank as one of the city's worst flood disasters. Merchants moved out their

goods as best they could, while elevated walkways were built on stilts so that people without boats could get around. As if this weren't enough, fierce lightning and savage winds of fifty-three miles an hour knocked down trees and severed telephone lines, while thunder shook older structures as though hit by an earthquake. The flood waters reached thirty-three feet, five feet above the previous flood level. The missions at both Portland and Vancouver were in a sad plight. The Vancouver farm was inundated, wiping out its many good crops of wheat, barley, Indian corn, oats, potatoes, vegetables and fruit orchards, and collapsing outbuildings and severely damaging fences.

At St. Vincent, the sisters watched the water creep up around them, while their Mother was "still in the mountains, unable to reach home." Mother Theresa and Mother Mary Antoinette managed finally to get aboard the only train still running, since the railroaders had added to the difficulties by going on strike. But this did little good, as the train couldn't reach stricken Portland anyway, and river and land travel were also impossible.

The flood waters climbed higher and higher around the hospital, reaching the second floor. Nuns, patients, hired personnel, kitchen help and others were huddled on the upper floors, trying to hold things together.

"St. Vincent stands in a great lake and cannot be reached except by wading or in boats, reported *The Oregonian*.

And the nuns later said that "before the flood finally subsided, we had lived through problems that challenged all our resources."

One can well imagine; there was not only the matter of protecting and saving the building and its contents, gathered through hard, long effort over the past decade, and stock and equipment on the grounds, but in trying to care for the sick and injured, feed the hungry and watch over the oldsters who were residents of the hospital. When Mother Theresa reached the scene at last, she was horrified.



Flood waters in 1894 reached a depth of over thirty feet in the downtown area. St. Vincent Hospital was flooded to the second story where sisters continued to try to care for their patients. This view is Fifth Street near Stark.





The ordeal of the nuns was quite enough; what had happened to her beloved hospital was—to put it mildly—“a disgrace.” She was now more determined than ever to leave this terrible location, for how could anyone operate a good, efficient, dignified hospital under these impossible, adverse and constantly unforeseeable conditions? What would stop the flood waters from returning next year? Or the next? Perhaps a spark from one of those industrial plants would burn the place down, if not drive everyone out of their minds from the racket. The new hospital building, safe on the hillside to the west, must be completed as rapidly as possible, for there were no guarantees of security, this place had been laid open to ruination, and they could only pray that nothing more would happen—and nobody could forecast what might be next in this unpredictable Northwest country.

“Mother Theresa is so enchanted with the progress of the building in Great Falls that she consulted with Mr. Gibson about the building in Portland,” wrote Mother Mary Antoinette to Mother Joseph from Columbus Hospital at Great Falls. “She thinks the inundation this year is a disgrace to the old hospital, and that it is urgent to resume work immediately on the new location so that we might move in as soon as possible. Mr. Gibson would be glad to take up the work (with the exception of the plumbing and heating) and wishes to submit his bid. Mother Theresa believes that for this year, the ground floor and three stories would be sufficient. She wrote to Sister Irene to get the plans from you to send to Mr. Gibson. She hopes that Sister Irene can reach you even in the face of the difficult travel.”

The work pressed forward under the close scrutiny of Mother Joseph who was becoming increasingly involved in the building of hospitals, schools, orphanages and other care centers in Washington State. In partnership with Mother Theresa, they made a determined team that contractors and workers couldn't ignore. In October 1894 from St. Vincent Hospital, she wrote Mother Mary Antoinette:

“I had to stop in Portland. Our sisters, always distrustful of their own decision, waited for me to help Mr. Blanchet to choose the electrician, a very important need right now. We must have a responsible company. Tell Mother Magdalen (depository) that the contract amounts to \$2,600 for the installation of wiring which will be covered with rubber tubing and recovered with copper. The contract includes the call-bell system in every room, as well as regulation bells, etc. The company will furnish light throughout the house free for six months.

“Mother Mary Theresa traveled to New Westminster with Father Superior (Archambeault) to meet her new sisters. These absences seem to give her rest. We miss her; her sisters here spare her all the painful worry connected with building. They have made novena after novena for her health.”

The work extended through another winter and often it seemed there was no progress at all. Mother Theresa continued to worry silently that another flood might strike before they could get moved. She could breathe easier only when they were up there on the hill, high above the city. More than two years had been taken in the excavation, grading, setting of the foundation and retaining walls, and then erecting the towering superstructure of the main building, 60 by 380 feet, a Gibraltar-like impregnable fortress that could stand the test of time and the assault of storm and wind, becoming a part of this very hillside itself.

At long last, on July 14, 1895—two decades less five days from the ceremony which gave the city and state its first hospital—the dedication drew thousands of dignitaries, church leaders and people from all walks of life to the hillside with its panoramic view. What everyone recognized quickly was that this was a distinctive achievement in construction, design, and modern hospitalization. And what a building it was! The six-story structure rested from bedrock on a foundation of quality stone with not only the great brick exterior walls, but every third partition which divided the rooms extending in one



solid mass of iron girders from foundation to metal roof, adding to the strength and safety of the building. Iron fire doors separated the hallways into compartments, and from basement to roof on the rear side were huge iron fire escapes, although the stout structure was felt to be completely fireproof.

The six corridors with extra high ceilings were twelve feet wide, terminating in balconies at each end of the building. Characteristic of the way the sisters did things was a 7 x 10-foot electric elevator in the center of the building, designed to accommodate cots or beds so that a patient needn't be moved when transferring him from one floor to another. In addition, this hospital, which had early adopted the telephone, had a complete system of electric bells and speaking tubes throughout the building so that, one writer observed, "rapid transit and communication in the house is perfect."

Nothing fell short in the amazing detail of design and equipment of what was recommended for a modern hospital, and in providing for the future. Within a few years, the south wing would be added in the hospital's first of many expansions. The many wards were described by an enthusiastic viewer as "the neatest in the world," and the private rooms as "handsome . . . some of them luxuriously furnished by friends, just to suit the particular fancies of even the most exacting." The charges, it was disclosed, would be \$7 per week, and \$14 and up for private rooms.

But the spacious "operating room" was considered to be the "gem" of the building. Largest single room in the hospital, it was illuminated by day on three sides by a big rotunda window and eight smaller windows, and at night by twenty electric and twenty gas lights, thus giving two kinds of lighting in case of a failure of one system. Walls were of soapstone, the floor of tile with a drainage system; and the surgery was equipped with the latest improved operating tables. In less than a quarter century, Portland medicine had come a long way from the days when Dr. Kinney performed his surgeries on crude

kitchen tables with poor lighting.

A steam heating and hot water system ran throughout the building. Food for patients traveled from the large basement kitchen by dumb waiter to every level where it would be distributed to dining and serving rooms on all floors. In this daylight basement level, trimmed in Tenino stone, were also extra rooms for patients inclined to violence, the sisters' community room, pantries, a laundry, the furnace, and miscellaneous facilities. Patient rooms, wards and additional surgeries were located on all floors, although no surgery was included on the third floor. The attic section was developed as a sisters' dormitory and chapel.

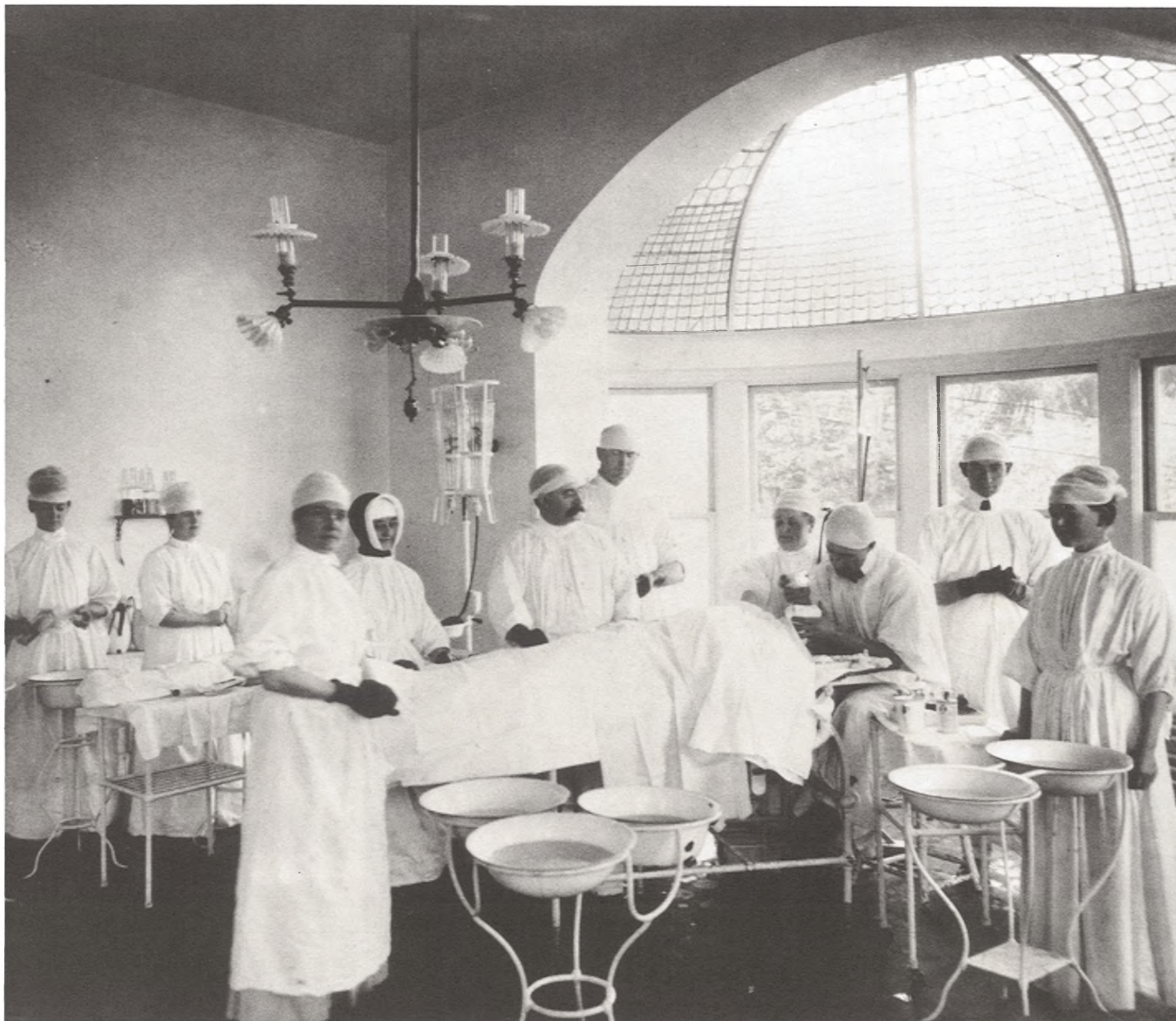
Electric lighting had largely replaced the gaslights of yesteryear as an additional safety factor. But daylight and a sense of airiness were felt everywhere, even in the huge corridors, as much consideration had gone into the planning by Architect Justus Krumbein for ventilation, sanitation and drainage. In all, the astounding new hospital would be quickly recognized as "a model institution," not only for the Pacific Northwest but for the entire nation, and in the next few years many doctors and potential builders and designers of hospitals would travel to St. Vincent to gain ideas and knowledge from what had been developed in this hospital of the future. The Sisters of Providence were again pioneering.

Estimates placed the construction costs from \$275,000 to \$300,000, far different from the \$22,000 of the hospital on Twelfth Street which already was appearing small and of the past. And as one reporter stressed, "This does not include the furnishing of the hospital, which will cost quite a round sum." Nothing was left undone, including grading streets, laying walks, and landscaping of the grounds into beautiful gardens, where the statue of St. Vincent de Paul would be placed.

Oregonians would long speak about this remarkable achievement carved from the hillside by the redoubtable Sisters of Providence, and would be reminded each time they looked toward the West Hills.



Another view of main surgery of the second St. Vincent Hospital, with operation in progress.





The second hospital was a Gibraltar-like structure of 275 bed capacity, and six stories high. From its opening the hospital was considered among the foremost in the nation. Mother Mary Theresa and the Sisters of Providence built for the future. They moved from the Slabtown area because of industrial crowding, for Portland had no zoning ordinances then.



On this festive day of dedication and blessing of the new hospital, in what one sister described as a “memorable year . . . not that it was not without sacrifice, but the happy times outweighed the difficult days,” many flowery speeches were heard, and many words of praise uttered. But nobody said it better than Dr. William Jones who reminded the audience:

“The real dedication of St. Vincent Hospital took place many years ago, while this hillside was still covered with the original forest of firs and when Portland was only a struggling village on the river banks. The real dedication took place in 1856 when a little company of four Sisters of Providence left Canada to dedicate themselves to hospital work and teaching in the Territory of Oregon. This building is a fitting monument to their bravery and devotion.

“A great hospital, like a great university, is something more than a collection of buildings, and their furniture. They are merely the outer covering, the abiding place of the real thing. It must have a history, traditions, achievements behind it, and a promising future before it. To thousands of people, St. Vincent Hospital is something more than a name. In thousands of homes, it is a household word. It is a place where some member of the family has been cared for in an illness or attended in an injury. To thousands of poor, it is a place that gave them refuge when overtaken by sickness or when struck down by accident. To hundreds of physicians it is a place where they learned the practical part of their profession in their student days. St. Vincent Hospital is not only a place for the sick; it is a great educational institution as well . . .

“This hospital, too, speaks eloquently of what women can accomplish in the conduct of large enterprises. I doubt that there is a business in this city, the magnitude and importance of whose affairs much exceeds that of this institution. Yet this great hospital was created, organized and is administered entirely by women. And the system of which it forms a part extending over the Northwestern states and

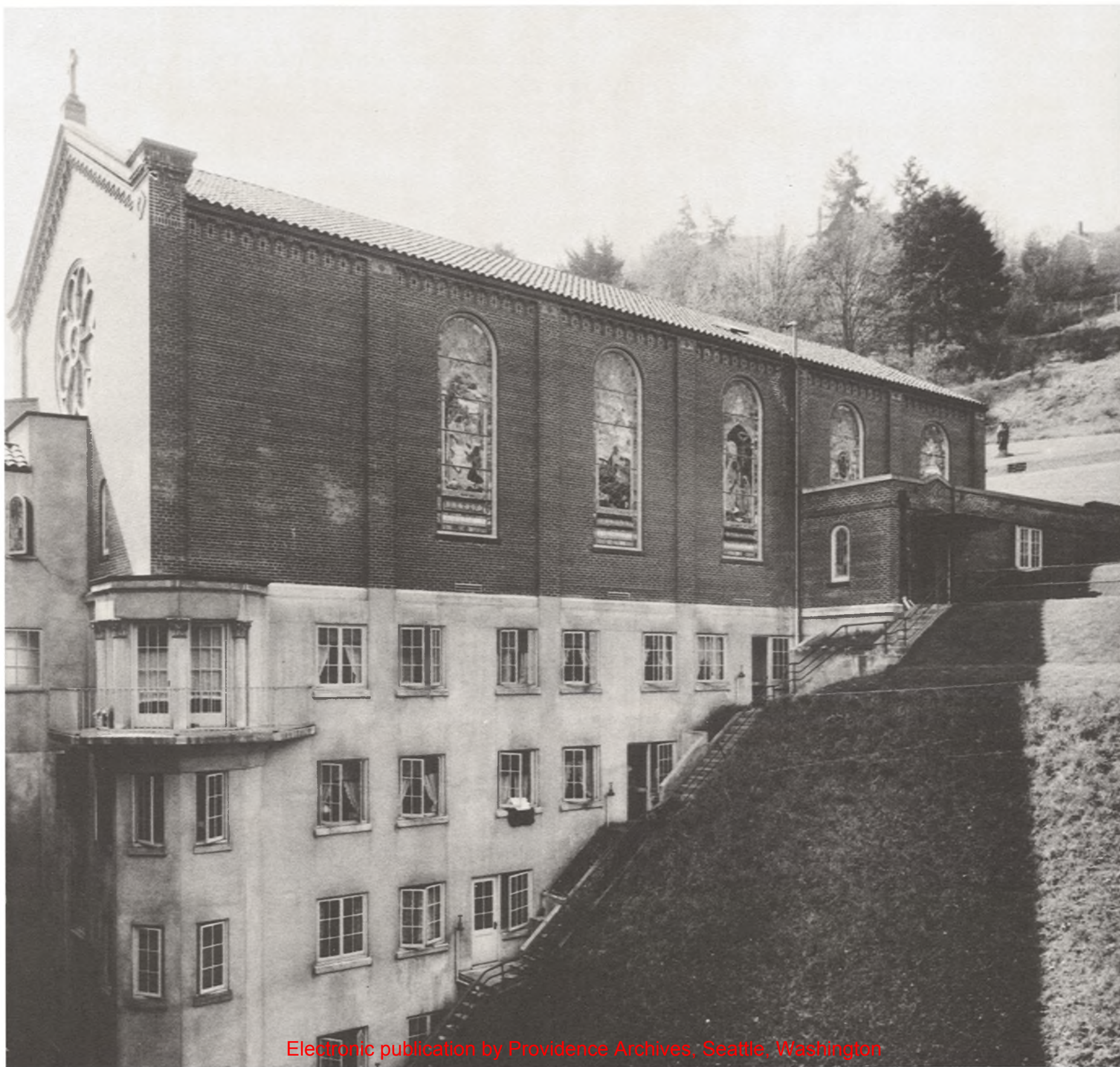
British Columbia is managed entirely by the Sisters of Providence. This is something for women to be proud of, and speaks more highly of woman’s mental powers than all the successful books ever written by women . . . It is an ornament and a credit to this city and a proper subject of pride.”

Mother Joseph, Mother Theresa and the other sisters, of whom there were now a large number, must have chuckled silently at the remarks about their talents and mental powers in what was staunchly considered a male domain. No matter; this was a great and wonderful day for them all. But looking across that grand panorama of city, rivers and rolling hills, on a good clear day such as the Oregon Country enjoyed in those years, your eyes might pick out in the far bank mist of the Columbia River, that very strip of land where four decades earlier, Mother Joseph and the others had arrived, frightened and filled with doubt, to establish their mission in this raw and merciless land. The miles from that place to this hillside weren’t so many, but the distance had been a long, rugged and precipitous western trail, filled with twisting turns, switchbacks, defiles and rockslides. Mother Joseph herself had felt it might be when she sounded her warning:

“Beginnings are always trying . . .”



The second St. Vincent Hospital was built against the steep slopes of the West Hills. The grounds were terraced and the building solidly a part of the mountain. The chapel area is shown.





## EPILOGUE: LANDMARKS OF HERITAGE

For more than seventy years St. Vincent Hospital flourished and grew and blazed new trails in the fields of medical and health care on the precipitous slope of the Tualatin Mountains, as they are officially called. Appearing as a startling bastion guarding the health of the city of Portland and the Pacific Northwest, the hospital's great walls of dark red brick were so much a part of the local scene that they became an immovable cornerstone, much as is that jagged mountain peak directly to the east which Portlanders claim as their own.

The move to that high hillside was the right decision, despite the fact that Mother Theresa and others of the Sisters of Providence suffered much criticism over the building site. Mother Theresa had been correct: Portland grew once again up to their doorstep, although this time there was sufficient land to serve as a buffer, no flood waters could reach this place, and the hospital was free of the noise and fouled air from industries and the railroads.

But today, in the centennial year of St. Vincent Hospital, a visit to that same hillside along Westover Drive can be an eerie experience. The sprawling edifice is vacant and foreboding, its interior black and cold, its windows shattered by vandals who are the scourge of this modern age, and a chilly wind licks at the place, rattling an occasional Venetian blind still hanging from an upper floor window. Only a few birds and perhaps a lone woodrat occupy the hospital now, once a bustling nerve center, for St. Vincent has moved again to the other side of these very mountains to take up the shifting challenges of this last quarter of the turbulent twentieth century. The building which Mother Theresa believed could stand forever will be torn down, perhaps in this centennial year and before this book is published, for it is a relic of the past, a ghost of the Old West, and obsolete for the world today. Yet somehow it is a sad thing, for this is another distinctive landmark of the old Portland, like the Union Station, the Portland Hotel, the Pittock mansion, and the skid road district of the waterfront which are a part of the herit-

age of an Oregon and a Portland that seem to fade by bits and pieces with each passing year, giving way to what everyone describes as "progress."

A lot of living—and dying, too—went on within those great brick walls. Hundreds of thousands of people were treated there, thousands of babies were born to succeeding generations, and the suffering of countless others was eased and people given renewed hope, while other untold numbers were fed and sheltered from the ravages of the world. The rattle of horsedrawn buggies was heard arriving at these entryways and delivery stations, while electric trolley cars churned up the hill, and some of the first victims of Portland's automobile accidents were brought there.

Through seven decades of war and peace, hard times and booms, and a steadily changing Portland, this building felt much that was experienced by the community, the state, and the Pacific Northwest: the raging influenza epidemics of post-World War I, during which many sisters also died caring for patients . . . the shipyard times of the two great wars . . . the Great Depression years . . . the terror of the wild Columbus Day Storm of 1962 . . . and the day by day human dramas and challenges, the sadness and the happy occasions . . . But that is another story . . . Now, rustic hallways where pale yellow and blue paint peels and rubble is everywhere no longer hear the happy French chatter, and the little prayers of the nuns; only the banging of a lone workman somewhere within the building's gloomy deep recesses breaks the silence of this tomb. It is therefore difficult to imagine all the activity that went on here until a very few years ago, when the third St. Vincent opened its doors a few miles away in the Beaverton area of Portland.

This hillside hospital grew steadily from the day of dedication in 1895 to keep abreast with the times and the latest medical techniques. A south wing was added in 1910, bringing the bed capacity to 300. A huge power and heating plant was completed the following year, and a nurses' home in 1930 which



later became an outpatient clinic; and another great addition in 1957, adding to the lobby and the physical therapy and emergency sections.

There were many firsts, starting with the nursing school and the school of anesthesia, extending into pioneer research and training programs to Oregon's first coronary intensive care and heart catheterization units, open heart surgery, and the world's first cardiac telemetry station. The hospital became the first locally to be standardized by the American College of Surgeons, which was the precursor to the Joint Commission on Accreditation of Hospitals; and bearing out forecasts, developed into one of the foremost medical institutions of the West and the nation. The heritage of nineteenth century pioneering of the Oregon Country by the Sisters of Providence has long since passed into the exploring frontiers of science and medicine in the Space Age.

In its first century St. Vincent Hospital has handled 1,094,220 inpatients and outpatients. In 1974 the count was 17,104 inpatients and 22,753 outpatients, for a total of 39,857 patients for the year compared with 320 in the hospital's beginning year of operation in 1875-76. Since the opening a century ago, 738,268 patients have been admitted and 355,952 outpatients treated, making a yearly average during the first hundred years of more than 10,000 patients. Since 1875 also, 71,465 babies have been born at the hospital which began with no maternity ward. And, in its first century the hospital has admitted 62,115 charity patients. Charity cases are still accepted—no one needing care is turned away—but the good sisters no longer serve meals to the poor, leaving this to other charity groups, centers and agencies. However, the meal service continued through the Great Depression and World War II, and in approximately seventy years 305,000 meals were served to the poor.

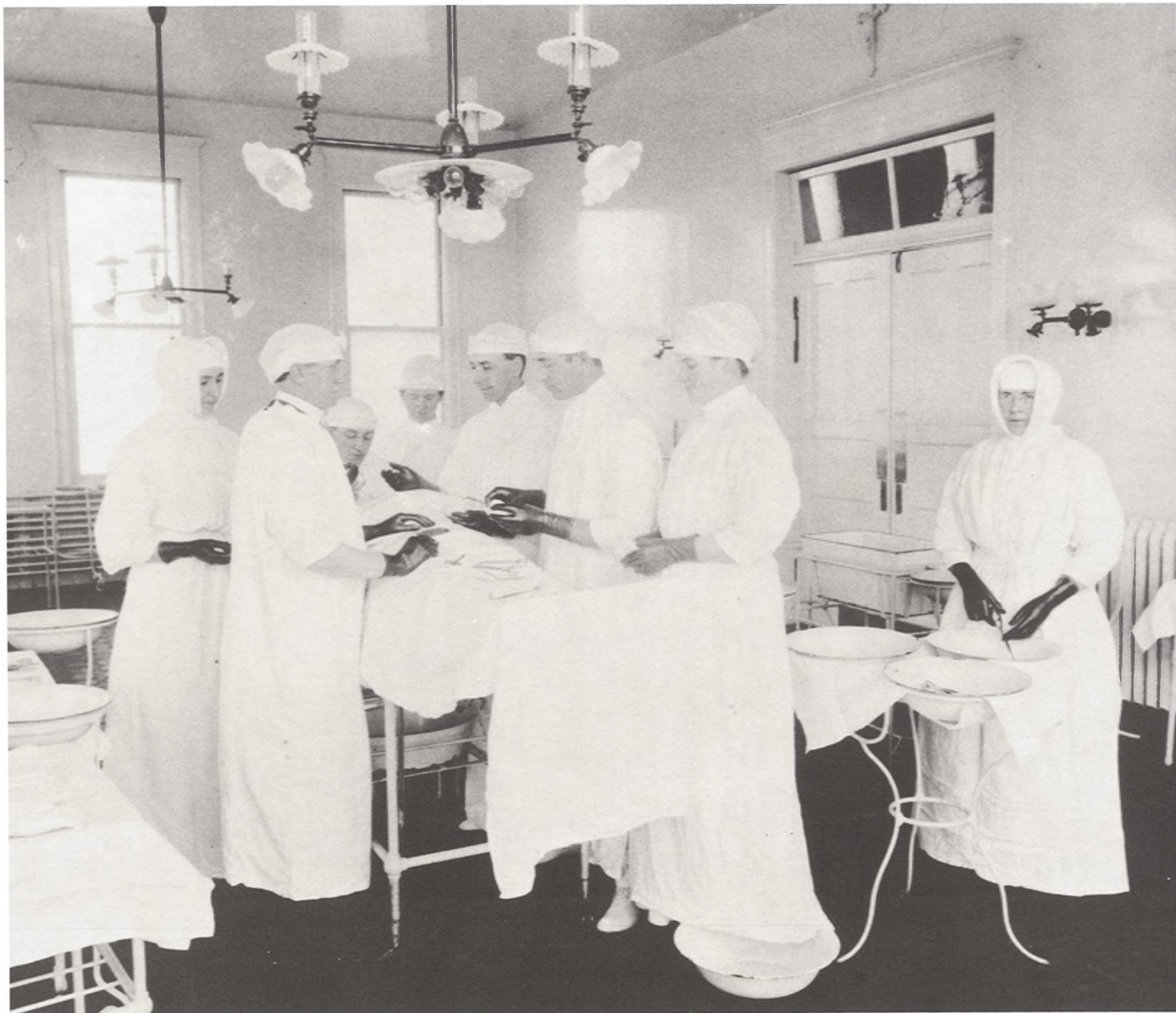
The hospital which opened with five sisters and a single general practitioner now has a total staff of 475 doctors, plus 365 nurses, more than 1,000 other employees, and 200 volunteers. The sisters, too, re-

main a part of the hospital, although not as many are working there as once did. In 1975 ten were working in various capacities, from administrative to surgery. But the sisters are still deeply involved, since they own, operate and govern the big medical center. And in 1972 the hospital employed a lay professional administrator, Thomas J. Underriner. For the first time St. Vincent didn't have a Mother Superior at its helm.

Whereby the original 75-bed hospital of 1875 cost about \$22,000, the sleek all-new St. Vincent with its 415 adult and pediatric beds and 40 bassinets bears the price tag of \$20,000,000 in building and equipment. And as everyone knows, hospital costs today are far above the modest dollar a day charged in 1875 by the sisters, with apologies for having to ask even that. But then, modern hospitals are known now more likely as medical centers; as much as any type of institution in this nation, hospitals are far different in operation and achieving results than the day when Mother Joseph drove the first stake at Twelfth and Marshall streets.

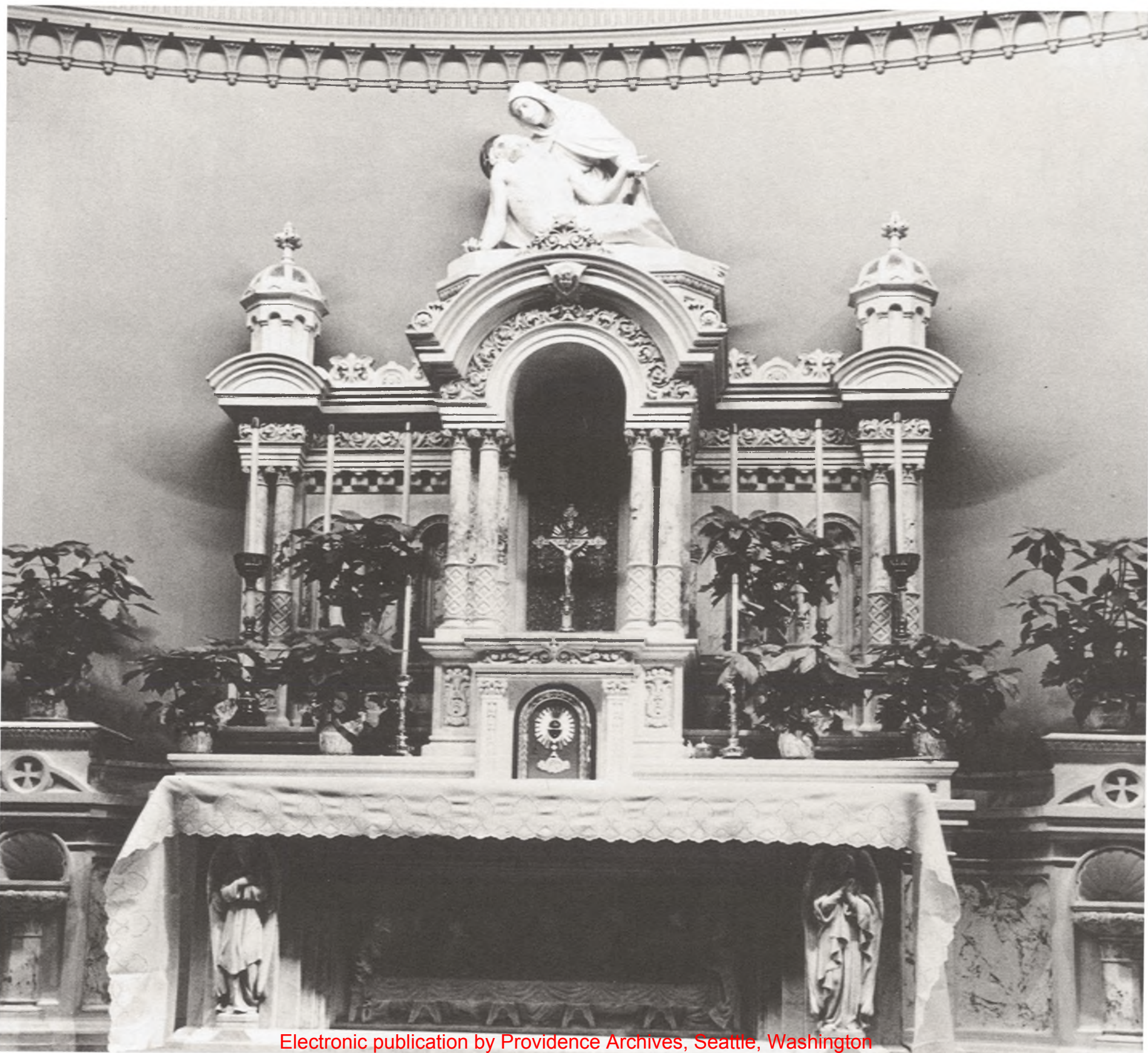
In the early 1960s it became increasingly apparent that St. Vincent once again was in a bind, unable to expand to keep abreast with the future. By then, too, the Sisters of Providence had built a second Portland facility on the East Side, the 448-bed Providence Hospital, although far removed from the location Ben Holladay once had in mind. The old St. Vincent land and building, outmoded by modern standards and admittedly expanded piecemeal in some of the extensions, were considered impossible, and the cost of clearing the property to begin again was prohibitive. After many serious and extensive studies, the Beaverton area overlooking the broad Tualatin Valley was selected as a new site. And again it was a landmark decision by the sisters, for the hospital would be leaving Multnomah County, its birthplace, but at the same time was giving Beaverton and heavily populated eastern Washington County its first hospital. But what with fast transportation and the great suburban growth of the past

Another view of surgery in the second St. Vincent Hospital. Dr. Henry Jones, one of the hospital's early physicians, is in charge.





St. Vincent Hospital and all others built by the sisters contained chapels. The altar of the Westover hospital, shown here, was beautiful and ornate.





decade, the criticism of the Westover site, that it was “clear out of town,” wasn’t heard as the new multi-million dollar center was opened in 1971, four years before the centennial.

Mother Joseph died in 1902 and Mother Theresa in 1921. But in 1975, with the centennial of St. Vincent, the sesquicentennial at Fort Vancouver, and the nation’s bi-centennial just ahead, there was strong renewed interest in the astounding career of Mother Joseph who in forty-six years of activity had emerged as one of the Pacific Northwest’s great early-day builders. Somehow she had been overlooked by other than her loyal supporters within the Catholic community; but she had established no less than eleven hospitals, seven academies, five Indian schools and two orphanages, nearly all still flourishing; and had been proclaimed officially as the Northwest’s “first architect” and the region’s first artist and sculptor in the medium of wood. Her hospitals were spread from Portland and Vancouver to Astoria and Seattle, into British Columbia and eastern Washington, and also into Idaho and Montana. She had been a consultant to countless other building projects, and had injected a certain spirit within the Sisters of Providence that is still carried forward along the Pacific Slope. While others were bent on exploiting the land, taking from it, and turning it to their own advantage, this astounding woman came to build and develop its permanent institutions as did no other individual.

Nothing remains in the block on N.W. Twelfth Street to indicate that Oregon’s first hospital stood there. The stout frame health center which was the cornerstone for all that followed, and had served so well during those early years, was torn down in 1938. Older Portlanders remember the structure, just off the Lovejoy ramp of the Broadway Bridge, but probably few had any idea of its origin, or that it was one of the city’s early foundations.

The sisters retained the building for a few years after moving to Westover for possible overflow purposes, but sold it in 1904. Fronting directly on the

expanding railroad yards of what was formerly Couch Lake, it became a cheap rooming house painted a garish red, operated by Japanese, and known incongruously as “The Beaver.” Today, a faded but still readable sign telling about The Beaver’s attributes is visible on a brick building in the same block; that it was “newly furnished, (had) electric lights, hot water, all modern conveniences,” with rooms priced at 50 cents, 75 cents and \$1.00. Only this sign indicates the location of the first St. Vincent, yet perhaps one of the city’s bronze historical markers should be placed there, for the site is worthy of some distinction, even though today it seems a strange location for a hospital.

Of course, it probably wouldn’t matter to Mother Theresa, Mother Joseph and the other pioneering sisters who trekked daily to town for meager supplies. Were they to return, save for a moment perhaps of sentimentality, they would turn their eyes and thoughts toward Beaverton. These were forward-looking ladies who could become excited about a new hospital across the hills and could see their own hands in it, for they were the builders who had placed the first cornerstone which symbolized the rich heritage to come. As one of them wrote many years ago, summarizing their Oregon adventure:

“If today our hospital is filled with patients . . . if today we enjoy the esteem of all Portland and its environs . . . if all classes of people come here to be cured . . . we are amply rewarded by the help we can give body and soul.”

THE END



Thomas J. Underriner (left) in 1972 became the first man to administer St. Vincent Hospital succeeding Sister Mary Lureen Ferschweiler (center) under whose leadership the current structure was planned and opened. Sister Genevieve Gorman (right) is a former provincial superior who serves at the hospital lobby information desk in conventional attire.





The cornerstone of the second building, which served the area on Westover Road for more than 70 years.

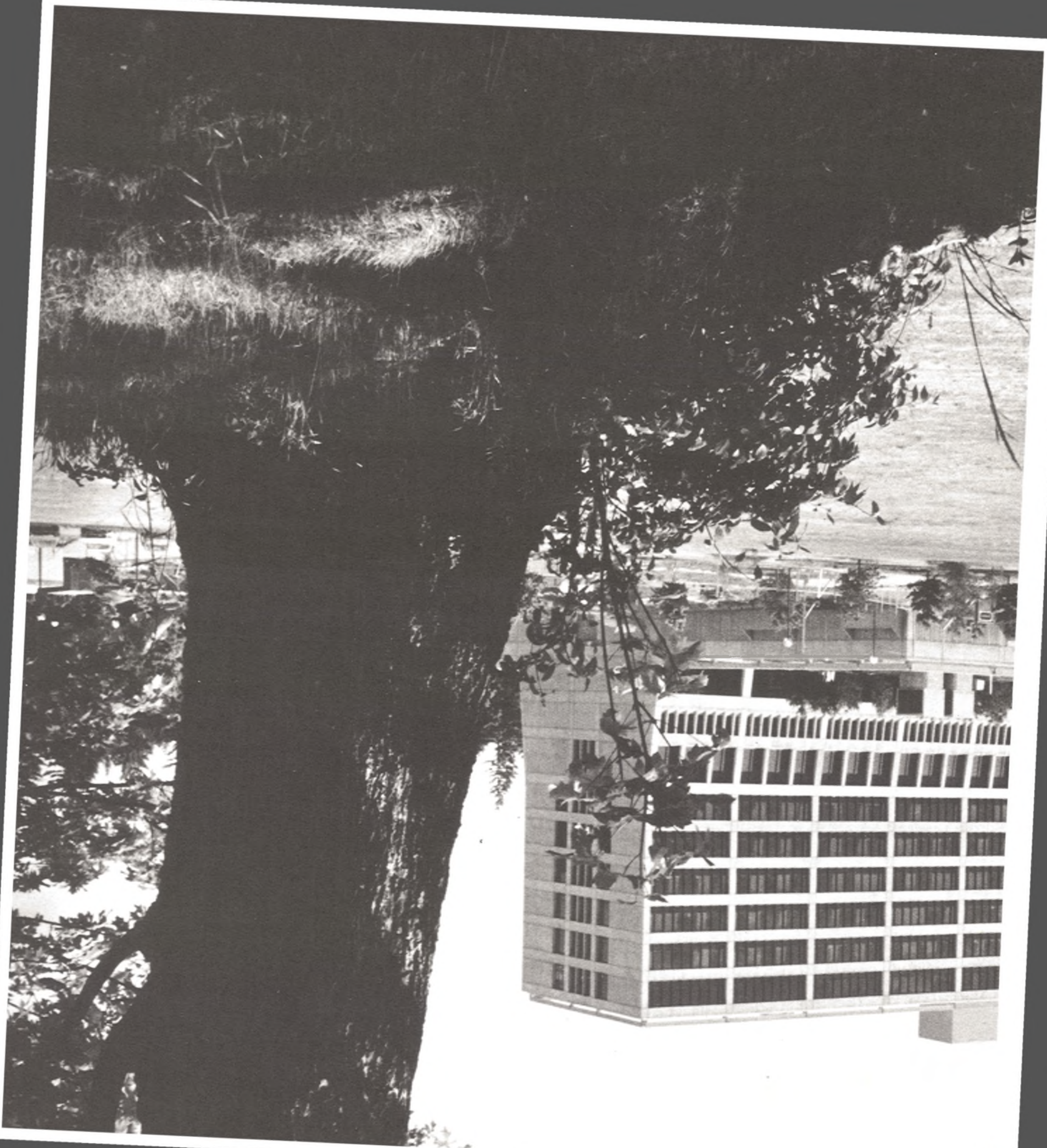
On the following page is the current St. Vincent Hospital and Medical Center, occupied in January 1971 on N.W. Barnes Road. Here the century-long tradition of excellence in health care is continued in a modern 415-bed facility located on 40 wooded acres in east Washington County.















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The archives of the Sisters of Providence in Seattle were heavily drawn upon, especially the "special collections" and original source material for St. Vincent Hospital.

The translated chronicles for St. Vincent Hospital from 1875 through the turn of the century were utilized extensively, including earlier historical writings, correspondence, records, reports, publications, manuscripts and old photographs, plats, and sketches. Of special value were scrapbooks kept by the sisters of newspaper clippings accounting the beginnings of St. Vincent Hospital, and its activities and problems.

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## APPENDIX

### ST. VINCENT HOSPITAL MEDICAL STAFF PRESIDENTS

1926 Ernest F. Tucker, M.D.  
1927 Ernst Sommer, M.D.  
1928 Ernst Sommer, M.D.  
1929 Ernst Sommer, M.D.  
1930 Ernst Sommer, M.D.  
1931 Ernst Sommer, M.D.  
1932 Thomas M. Joyce, M.D.  
1933 Thomas M. Joyce, M.D.  
1934 Thomas M. Joyce, M.D.  
1935 Thomas M. Joyce, M.D.  
1936 Thomas M. Joyce, M.D.  
1937 Thomas M. Joyce, M.D.  
1938 Thomas M. Joyce, M.D.  
1939 William Shea, M.D.  
1940 William Shea, M.D.  
1941 William Shea, M.D.  
1942 William Shea, M.D.  
1943 William Shea, M.D.  
1944 William Shea, M.D.  
1945 E. W. St. Pierre, M.D.  
1946 J. D. Sternberg, M.D.  
1947 Harry C. Blair, M.D.  
1948 Dean B. Seabrook, M.D.  
1949 J. Milton Murphy, M.D.  
1950 Albert L. Holman, M.D.  
1951 H. H. Thatcher, M.D.  
1952 Wilmot C. Foster, M.D.  
1953 Richard F. Berg, M.D.  
1954 Leo J. Meienberg, M.D.  
1955 Arch W. Diack, M.D.  
1956 Thomas R. Montgomery, M.D.  
1957 Arthur L. Rogers, M.D.  
1958 Millard S. Rosenblatt, M.D.  
1959 Thomas J. Fox, M.D.  
1960 Howard L. Cherry, M.D.  
1961 Donald E. Olson, M.D.  
1962 Bernard P. Harpole, M.D.  
1963 Joseph E. Nohlgren, M.D.  
1964 Allen M. Boyden, M.D.  
1965 Joseph M. Roberts, M.D.  
1966 George A. Boylston, M.D.  
1967 Russell L. Johnsrud, M.D.  
1968 Joseph W. Nadal, M.D.  
1969 Gerald F. Whitlock, M.D.  
1970 Ernest T. Livingstone, M.D.  
1971 Ambrose B. Shields, M.D.

1972 Albert A. Oyama, M.D.  
1973 Paul E. Zuelke, M.D.  
1974 Donald W. Sutherland, M.D.  
1975 Toshio Inahara, M.D.

### AMONG EARLIEST PHYSICIANS ASSOCIATED WITH ST. VINCENT HOSPITAL

D. J. Bell, M.D.  
A. D. Bevan, M.D.  
Otto Binswanger, M.D.  
James Dickson, M.D.  
Henry Jones, M.D.  
William Jones, M.D.  
J. A. Kane, M.D.  
Alfred Kinney, M.D.  
A. E. Mackaw, M.D.  
K. A. J. Mackenzie, M.D.  
A. D. McKenzie, M.D.  
A. C. Panton, M.D.  
A. C. Smith, M.D.  
C. C. Strong, M.D.  
E. F. Tucker, M.D.  
George F. Wilson, M.D.  
Holt C. Wilson, M.D.

### 1975 ST. VINCENT HOSPITAL MEDICAL STAFF EXECUTIVE COMMITTEE

Toshio Inahara, M.D.  
*President*  
Nathaniel D. Wilson, M.D.  
*President-Elect*  
Donald W. Sutherland, M.D.  
*Past President*  
Peter C. Fuchs, M.D.  
*Secretary-Treasurer*  
Seymour Haber, M.D.  
*Member*  
Charles R. Starr, M.D.  
*Member*  
Donald R. Olson, M.D.  
*Member*  
Kenneth E. W. Melvin, M.D.  
*Chief, Department of Medicine*  
William R. McAllister, M.D.  
*(Interim)*  
*Chief, Department of Surgery*

### 1975 ST. VINCENT HOSPITAL CHIEFS OF CLINICAL DEPARTMENTS

Walter C. Bernards, M.D.  
*Anesthesia*  
Bernard P. Harpole, M.D.  
*General Practice*  
Kenneth E. W. Melvin, M.D.  
*Medicine*  
James E. Dahlman, M.D.  
*Obstetrics-Gynecology*  
Samuel F. Gill, M.D.  
*Orthopedic*  
Lester L. Bergeron, M.D.  
*Otolaryngology*  
Richard L. DeKlotz, M.D.  
*Pediatric*  
Seymour Haber, M.D.  
*Radiology*  
William R. McAllister, M.D.  
*(Interim)*  
*Surgery*

### 1974-75 ST. VINCENT HOSPITAL HOUSE STAFF GENERAL SURGERY RESIDENTS:

Richard Arbeene, M.D.  
Kevin Au, M.D.  
Charles Dietl, M.D.  
Wael Feteih, M.D.  
Ronald Knight, M.D.  
David Logan, M.D.  
Ladislav Lukacsik, M.D.  
Robert Rakozy, M.D.  
Tristan Stronger, M.D.  
Steven Wilhite, M.D.

### GENERAL PRACTICE RESIDENT: Ian Barr, M.D.

### FELLOWS IN CARDIOVASCULAR SURGERY:

Yutaka Konishi, M.D.  
Robert Lawson, M.D.  
Bisheshwar Prasad, M.D.

### FELLOW IN PERIPHERAL VASCULAR SURGERY:

Ajitkumar Trivikram, M.D.

PATHOLOGY RESIDENTS:

Girgis Awad, M.D.  
Ronald Bergman, M.D.  
Richard Jennings, M.D.  
Gary Newland, M.D.  
Frank Thomas, M.D.  
Arthur Van Eaton, M.D.

1975 MEDICAL STAFF

HONORARY STAFF

Bailey, Paul F., Sr.  
Blair, Harry C.  
Boylen, Ernest L.  
Brill, Isidor C.  
Diack, Arth W.  
Diack, Samuel L.  
Gregg, Dwight W.  
Howard, Martin A.  
Illge, Alferd H.  
Lewis, Howard P.  
Littlehales, Charles E.  
Margason, Merl L.  
Mason, Curtis E.  
Mihnos, Frank (D.M.D.)  
Nakadate, K. James  
Neely, Paul T.  
Ray, Jesse L.  
Rosenblatt, Millard S.  
Sichel, Martin S.  
Sister Mary Laureen Ferschweiler  
Sweeney, L. Russell  
Unthank, DeNorval  
Wilson, William M.  
Wulf, Robert F.

CONSULTING STAFF

Benson, Ralph C.  
Boverman, Harold  
Carter, C. Conrad  
Dahl, Joyle  
Durfee, Raphael B.  
Lawrence, G. Hugh  
McFarlane, Robert A.  
Perlman, Frank  
Pirofsky, Bernard  
Robertson, Keith A.  
Slama, James O.

Smith, Rogers J.  
Trainer, Joseph B.

ACTIVE STAFF

Acker, Robert L.  
Adams, George B.  
Anderson, Robert L.  
Baer, William B.  
Baker, David M.  
Berg, Richard F.  
Bergeron, Lester L.  
Bergstrom, John O.  
Berland, John E.  
Bernard, Richard M.  
Bernards, Walter C.  
Blickle, James F.  
Bline, Norman L.  
Boicourt, O. Willis  
Boyden, Allen M.  
Boylston, George A.  
Braun, Esmond  
Brodeur, Michael T. H.  
Brown, David J.  
Brown, Paul M.  
Bubalo, John M.  
Butler, Jay B. V.  
Campbell, Edmund W.  
Campbell, Timothy J.  
Case, Raymond A., Jr.  
Caspersen, LeRoy S.  
Chamberlain, George E.  
Chapman, Richard D.  
Cherry, Howard L.  
Coffen, Charles W.  
Condon, Robert J.  
Dahlman, James E.  
deBruin, Theo  
deCastro, Enrique M.  
DeKlotz, Richard L.  
deMaria, F. John  
Dennis, Daniel L.  
deVilliers, E. H. Gordon  
Devine, Daniel M.  
DeWeese, David D.  
Dick, H. Lenox H.  
Ditmore, Harry B., Jr.  
Donahower, George F.  
Doughton, Robert P.  
Edelson, Zanly C.

Egan, John M.  
Ellison, John H.  
Everts, Edwin C.  
Fagan, Charles A.  
Fagan, Thomas E.  
Fearl, James D.  
Fellman, Robert G.  
Felter, Frederick C.  
Fennessy, Thomas J.  
Fletcher, William S.  
Fox, Thomas J.  
Fric, Frank  
Fuchs, Peter C.  
Garges, Lawrence M.  
Geist, Howard J.  
Gilbaugh, James H., Jr.  
Gill, Samuel F.  
Gilmore, Martin F.  
Goldman, Robert D.  
Graham, Douglas W.  
Greaves, Fern H.  
Grossenbacher, Edward A.  
Grout, J. Gordon  
Gustafson, Robert H.  
Haber, Seymour  
Hand, John R.  
Harber, James V.  
Harpole, Bernard P.  
Harpole, Gerald T.  
Hart, Joseph T.  
Hartford, James T.  
Hauge, Arthur L.  
Hodgson, Richard A.  
Holden, Donald H.  
Imbrie, J. Donald  
Inahara, Toshio  
Johnson, M. Harvey  
Johnson, R. Martin  
Johnsrud, Russell L.  
Jones, Frank D.  
Kayser, Edwin A., Jr.  
Keane, J. Michael  
Keane, Roger H.  
Keizer, Russell J.  
Kelley, Harley D.  
Kerr, Moyt W.  
Kimmel, John W.  
Kloos, Edward K.  
Korn, Edward L.



Krygier, John J.  
Lachman, Alan B.  
Lamoreaux, LeRoy F.  
Landrey, Darrell W.  
Larson, L. William  
Lee, Harry A.  
Lee, T. David, Jr.  
Leon, Fernando  
Liechty, R. Dale  
Lindgren, Aarne J.  
Lingas, John  
Livingstone, Ernest T.  
Lowy, Richard O.  
Lundberg, Laury E.  
Mack, James L.  
Manion, Donald T.  
Matsuda, Arthur T.  
McAllister, William R.  
McCall, J. Oppie, Jr.  
Meienberg, Leo J.  
Melvin, Kenneth E. W.  
Melvin, Marcus W.  
Mendelson, Robert A.  
Mettler, Donald C.  
Miller, David B., Jr.  
Montgomery, Thomas R.  
Nadal, Joseph W.  
Nathan, Peter A.  
Neilson, Robert O.  
Nelson, James D.  
Nohlgren, Joseph E.  
Olson, Donald E.  
Olson, Donald R.  
O'Shea, Richard J.  
Oyama, Albert A.  
Pappas, James T.  
Partridge, John W.  
Pasquesi, Theodore J.  
Perkins, Norris H.  
Perrin, Eugene R.  
Phelan, John P.  
Pitman, William G.  
Poppe, J. Karl  
Post, Robert H.  
Prewitt, Gordon  
Raglione, Ugo W.  
Rinehart, Robert E.  
Roberts, Joseph M.  
Rogers, Arthur L.

Rogers, Wayne R.  
Rosenberg, Jack A.  
Rosencrantz, David R.  
Rullman, David R.  
Rush, John B.  
Schleuning, Alexander J.  
Selling, Philip  
Semler, Herbert J.  
Shields, Ambrose B.  
Simmons, Robert D.  
Singer, Milton  
Smith, Donald T.  
Smith, Frank B.  
Smith, James D.  
Smith, K. Ronald  
Springer, John H.  
Stack, Thomas J.  
Stanley, Lauren K.  
Stark, Donald B.  
Starr, Albert  
Starr, Charles R.  
Storino, Henry E.  
Struckman, J. Scott  
Stumme, Luther P.  
Summers, Gordon W.  
Sutherland, Donald W.  
Sweetman, William R.  
Takla, Gamil N.  
Talbot, Thomas E.  
Tanner, K. Nolen  
Thompson, John W.  
Thompson, Lee  
Tinker, Robert H.  
Turner, Robert H.  
Van Sickle, David G.  
Vessely, Jon C.  
Vilhauer, Sandra A.  
Voiss, Daniel V.  
Watson, James MacD.  
Weed, Linton G.  
Welborn, W. Stanley  
Welch, John D.  
Wheeler, W. Mark  
Williams, W. Paul, D.O.  
Wilson, David F.  
Wilson, Nathaniel D.  
Wisdom, David S.  
Wood, Gregg D.  
Wood, James A.

Wysham, Donald N.  
Zivin, Lawrence S.  
Zuelke, Paul E.

#### ASSOCIATE STAFF

Ahmad, Aftab  
Alberty, Roger E.  
Anderson, Thomas P.  
Baker, James W.  
Blosser, John A.  
Cormack, Alvin P.  
Epstein, Robert W.  
Garrison, Henry B.  
Gibson, Robert C.  
Hattenhauer, Mark T.  
Hendricks, Edward L.  
Jackson, A. Eugene, Jr.  
Key, Douglas J.  
Macfarlane, Curtis A.  
Maks, Stephen W.  
Matar, Adel F.  
McCulloch, Michael J.  
McMahan, Hugh B.  
Morita, Lloyd T.  
Newcom, Samuel R.  
Okies, J. Edward  
Prendergast, William J.  
Quilici, Natale D.  
Robinson, Charles R.  
Schwarz, Gerald R.  
Sikes, R. Anthony  
TenEyck, James R.  
Thompson, David P.  
Unger, Phillip S.  
Warnell, Charles E.  
Young, David Y. W.

#### COURTESY STAFF

Ahmad, Masud  
Allen, Richard  
Arkless, Richard  
Awe, William C.  
Bachman, Daniel M.  
Bachulis, Ben L.  
Bailey, Paul F., Jr.  
Baker, Harvey W.  
Baker, Russel L.  
Balen, Robert F.  
Bardana, Emil J., Jr.

Barr, John R.  
 Baskin, Michael S.  
 Bass, Jerry J.  
 Battalia, Jack E.  
 Beatty, Joseph O.  
 Bell, David B.  
 Bennett, Thomas T.  
 Bennett, William M.  
 Berg, Arthur W.  
 Bigley, Robert H.  
 Bischoff, Theodore M.  
 Blachly, Paul H.  
 Boncheck, Lawrence I.  
 Bouneff, Christ (D.M.D.)  
 Bowerman, W. Maurice  
 Breese, Melvin W.  
 Brooks, James A.  
 Browning, Charles H.  
 Brugger, Thomas E.  
 Burns, Robert P.  
 Burton, Joseph (D.M.D.)  
 Bussman, John W.  
 Button, Morris  
 Callas, Stanley D.  
 Campbell, John R.  
 Carlisle, Steven J.  
 Clarke, Winfred H.  
 Cohen, Lawrence J.  
 Cook, David M.  
 Cordova, Gilbert M.  
 Corti, George N.  
 Corwin, Raymond S.  
 Cottrell, George W.  
 Cross, James A.  
 Dixon, Henry H., Jr.  
 Dunham, Tom R.  
 Eby, Roland D.  
 Eilers, Anton F.  
 Eland, Donald G. (D.M.D.)  
 Ellerby, Richard A.  
 Enden, James A.  
 Farley, James A.  
 Farr, William F.  
 Fearl, Clifford L.  
 Fergus, James W.  
 Field, J. Edward  
 Flanery, John R.  
 Froom, Donald W.  
 Fuller, Malcolm E.  
 Fulsher, Remy W.  
 Gallo, Anthony E., Jr.  
 Gardner, J. Scott  
 Giesy, Jerry D.  
 Gillick, James B.  
 Glaubke, John A.  
 Goldsmith, Herbert E.  
 Goodnight, Scott H.  
 Goss, J. Catlin  
 Graham, Michael H.  
 Grewe, Ray V.  
 Griffin, C. Kirby  
 Griswold, Herbert E.  
 Hallin, Roger W.  
 Haney, Robert F.  
 Hansen, John R.  
 Harder, John  
 Harrison, William D.  
 Hauge, Christopher W.  
 Hayes, John F.  
 Helzerman, Ralph F., Jr.  
 Hill, Dennis R.  
 Holzgang, Curtis R.  
 Hooper, David G.  
 Hornick, Frederick W.  
 Hummel, Errett E., Jr.  
 Hurst, William W.  
 Hutchinson, Alfred C.  
 Johnson, Robert B.  
 Kelley, Eugene O. (D.M.D.)  
 Kiest, Calvin H., Jr.  
 Kingery, Frederick A. J.  
 Kinzel, Gerald E.  
 Klass, Alvin M.  
 Kosterlitz, Richard H.  
 Langston, Laurence R.  
 Larson, Wilbur L. E.  
 Lawson, Russell K.  
 Lee, G. Prentiss  
 Lehman, Theodore H.  
 Leibrecht, Berthold  
 Lockwood, Darrell L.  
 Long, George B.  
 Loosli, C. Gary  
 Maletzky, Barry M.  
 Marcel, Leonard J.  
 Markley, Richard E.  
 Marshall, William R.  
 Marxer, John L.  
 Massar, J. Clifton  
 May, John A.  
 McCraw, Louis H.  
 McDaniel, Donald W.  
 McGreevey, Donald P.  
 McKillop, Robert G.  
 Meihoff, Walter E.  
 Meyer, James V.  
 Misko, John C.  
 Molendyk, John M.  
 Naylor, Jack  
 Neff, Kent E.  
 Nelson, Hans G.  
 Nevill, Bobby D.  
 O'Dea, James E.  
 O'Donovan, John E.  
 Oerther, Frederick J.  
 Page, U. Scott  
 Palmer, Donald  
 Panian, Richard P.  
 Parrott, Max H.  
 Parsons, William R.  
 Pattee, Burton C.  
 Patton, Robert W.  
 Paull, David P.  
 Paxton, Harold D.  
 Pearson, William H.  
 Perkins, James G.  
 Peterson, Lee H.  
 Petroske, James L.  
 Porter, John M.  
 Quan, Arlen  
 Raaf, John E.  
 Ramsthal, Donald D.  
 Reimer, Gerald R.  
 Reule, G. Ronald  
 Reynolds, Walter C.  
 Richards, Oren R., Jr.  
 Robinson, Paul J.  
 Romanaggi, Donald V.  
 Rosenbaum, Edward E.  
 Rossi, A. J. (D.M.D.)  
 Rowland, Willard D.  
 Sandoz, Ivan T.  
 Schimschock, James R.  
 Schwiebinger, Gerald W.  
 Seres, Joel L.  
 Smith, Mary A.  
 Smith, Norris D.



Snedecor, Philip A.  
 Snook, William M.  
 Stevenson, John L., Jr.  
 Stone, Elizabeth J.  
 Stranburg, Clifford O.  
 Stupfel, James F.  
 Swank, Roy L.  
 Tanabe, Calvin T.  
 Tank, Edward S.  
 Tarnasky, John W.  
 Thompson, George E.  
 Thornfeldt, Robert E.  
 Trautman, Paul  
 Trautmann, Phillip R.  
 Turco, Ronald N.  
 Uhlig, Bennett E.  
 VanRooy, Clemens W.  
 Vetto, R. Mark  
 Voy, Robert O.  
 Wagner, Barbara E.  
 Wagner, David G.  
 Wagner, Robert B.  
 Waterman, Ernest A.  
 Werner, Peter E. (D.M.D.)  
 Whitely, James M.  
 Whittemore, James P.  
 Wild, John B.  
 Wiley, David C.  
 Young, Robert D.  
 Zimmerman, Richard C.

ST. VINCENT HOSPITAL  
ADVISORY BOARD CHAIRMEN

1951 Charles Wentworth  
 1952 Charles Wentworth  
 1953 Charles Wentworth  
 1954 Charles Wentworth  
 1955 Charles Wentworth  
 1956 Gordon Orput  
 1957 Henry E. Baldrige  
 1958 Henry E. Baldrige  
 1959 Harold F. Wendel  
 1960 Edwin C. Dwyer  
 1961 Russell M. Colwell  
 1962 William B. Boone  
 1964 William B. Boone  
 1967 Moe M. Tonkon  
 1968 Moe M. Tonkon  
 1969 Moe M. Tonkon

1970 Moe M. Tonkon  
 1971 Moe M. Tonkon  
 1972 George D. Rives  
 1973 George D. Rives  
 1974 William H. Hunt  
 1975 William H. Hunt

1975 ST. VINCENT HOSPITAL  
ADVISORY BOARD

William H. Hunt  
*Chairman*  
 LeRoy B. Staver  
*Vice Chairman*  
 Cyrus T. Walker  
*Secretary*  
 Joseph J. Adams  
 Dan Davis  
 Gerald W. Frank  
 C. Howard Lane  
 Michael Park  
 Robert J. Rickett  
 George D. Rives  
 Arthur L. Rogers, M.D.  
 Robert W. Roth  
 Moe M. Tonkon  
 Howard Vollum  
 Frank E. Nash  
*Ex Officio*  
 Toshio Inahara, M.D.,  
*Ex Officio*

1975 ST. VINCENT MEDICAL  
FOUNDATION COUNCIL  
OF TRUSTEES

William H. Hunt  
*President*  
 LeRoy B. Staver  
*Vice President*  
 Cyrus T. Walker  
*Secretary-Treasurer*  
 Al M. Camosso  
*Assistant Secretary-Treasurer*  
 Glenn L. Jackson  
*Charter President (1969-1975)*  
 Travis Cross  
*Executive Director*  
 Joseph J. Adams  
 Dan Davis  
 Gerald W. Frank

Sister Susan Hunsaker  
 C. Howard Lane  
 Mrs. Milo K. McIver  
 Thomas R. Montgomery, M.D.  
 Robert B. Pamplin  
 Michael Park  
 Robert J. Rickett  
 George D. Rives  
 Arthur L. Rogers, M.D.  
 Robert W. Roth  
 Moe M. Tonkon  
 Thomas J. Underriner  
 Howard Vollum

SISTERS OF PROVIDENCE IN OREGON  
1975 GOVERNING BOARD

Sister Louise Gleason  
*Chairman*  
 Sister Dona Taylor  
*President & Vice President for Health  
& Social Services*  
 Sister Lorraine Hofmeister  
*First Vice President*  
 Sister Mary Gleason  
*Secretary*  
 Sister Susan Hunsaker  
*Vice President for Finance*  
 Sister Lucille Dean  
*Vice President for Education*  
 Sister Clare Lentz  
*Director for Religious Development*  
 Jack B. Brown  
*Executive Vice President of Health Care  
Operations*  
 William G. Conley  
*Administrator, Providence Medical  
Center (Portland)*  
 Thomas J. Underriner  
*Administrator, St. Vincent Hospital  
& Medical Center*  
 B. J. Stormberg  
*Administrator, Providence Hospital  
(Medford)*  
 Sister Marcella Ann  
*Providence Child Center*  
 SISTERS OF PROVIDENCE  
 AT ST. VINCENT HOSPITAL  
 Sister Dianne Crawford, L.P.N.  
*Nursing Service*

Sister Lenora Donovan  
*R.N. Pastoral Services*  
 Sister Genevieve Gorman  
*Information Desk*  
 Sister Marleen Hull, R.N.  
*Administration*  
 Sister Francella LaFramboise  
*Information Desk*  
 Sister Barbara Ellen Lundberg, R.N.  
*Pastoral Services*  
 Sister Jeanne Parent  
*Information Desk*  
 Sister Agnes Rohr  
*Educational Materials*  
 Sister Peggy Sullivan  
*Information Desk*  
 Sister Margaret Mary Wilson, R.N.  
*Intravenous Department*

**ST. VINCENT HOSPITAL  
 ADMINISTRATORS**

Mother Mary Theresa 1875-1892  
 (M. Rosalie Muller)  
 Sister Mary Conrad 1892-1893  
 (Louise Kratz)  
 Sister Irene 1893-1898  
 (Marguerite Meunier)  
 Sister Mary Frederic 1898-1907  
 (Elizabeth Niquette)  
 Sister Alexandrine 1907-1910  
 (Rose of Lima Nolin)  
 Sister Marie Alexander 1910-1916  
 (Mary Jane Goyner)  
 Sister Petronilla 1916-1922  
 (Anna Maria Heyden)  
 Sister Gaudentia 1922-1926  
 (Caroline Schwal)  
 Sister Petronilla 1926-1931  
 (Anna Maria Heyden)  
 Mother Vincent Ferrier 1931-1937  
 (Marie Rose Proulx)  
 Mother Petronilla 1937-1943  
 (Anna Maria Heyden)  
 Sister Rose Imelda 1943-1949  
 (Maria Lasalle)  
 Mother Pascal 1948-1950  
 (Laura Parent)  
 Mother Flora Mary 1950-1956  
 (Martha MacDonald)

Sister Luke of the Saviour 1956-1958  
 (Alberta Duval)  
 Sister Francis Ignatius 1958-1964  
 (Gladys Teresa McDowell)  
 Sister Mary Laureen 1964-1971  
 (Rita Mary Ferschweiler)  
 Mr. Thomas J. Underriner 1972-present

**1975 ST. VINCENT HOSPITAL  
 ADMINISTRATIVE COUNCIL**

Thomas J. Underriner  
*Administrator*  
 William E. Creighton  
*Associate Administrator*  
 Al M. Camosso  
*Assistant Administrator, Finance*  
 Travis Cross  
*Assistant Administrator,  
 Community Affairs*  
 Chip N. Hinckley  
*Assistant Administrator, Planning*  
 Sister Marleen Hull  
*Assistant Administrator, Patient Care*  
 Peter F. Malen  
*Assistant Administrator,  
 Industrial Relations*  
 Kenneth R. Zinsli  
*Director of Building Services*  
 Silvio L. Pienovi  
*Administrative Assistant*

**ST. VINCENT GUILD PRESIDENTS**

1950-51 Mrs. Leo Meienberg (Frances)  
 1951-52 Mrs. Harry C. Murphy (Dorothy)  
 1952-53 Mrs. Wm. P. Sharkey (Frances)  
 1953-54 Mrs. Moyt W. Kerr (Mildred)  
 1954-55 Mrs. Harry Blair (Verna)  
 1955-56 Mrs. Charles Carter (Helen)  
 1956-57 Mrs. Edna Kuckenberg  
 1957-58 Mrs. Mary Matilda Barker  
 1958-59 Mrs. R. A. Bissett (Rose)  
 1959-60 Mrs. Wm. G. East (Louise)  
 1960-61 Mrs. Thomas J. Fox (Madalena)  
 1961-62 Mrs. Lester W. Humphreys (Betty)  
 1962-63 Mrs. Toni Daly  
 1963-64 Mrs. Chas. Kitchel (Pat)  
 1964-65 Mrs. Joseph Nohlgren (Laverne)  
 1965-66 Mrs. L. M. Smith (Dodie)

1966-67 Mrs. Henry Allison (Jane)  
 1967-68 Mrs. George Perkins (Gretchen)  
 1968-69 Mrs. LeRoy Caspersen (Corky)  
 1969-70 Mrs. Fred Bradshaw (Betty)  
 1970-71 Mrs. Stewart Cannon (Jean)  
 1971-72 Mrs. Carter Boggs (Terri)  
 1972-73 Mrs. Thomas Joseph (B. J.)  
 1973-74 Mrs. Thomas Joseph (B. J.)  
 1974-75 Mrs. L. M. Smith (Dodie)

**1975 ST. VINCENT GUILD OFFICERS**

Dodie Smith  
*President*  
 B. J. Joseph  
*Past President*  
 Charlene Camosso  
*President-Elect*  
 Sherri Crockatt  
*Vice-President*  
 Barbara Blakeley  
*Recording Secretary*  
 Doris Walker  
*Corresponding Secretary*  
 Norma Richard  
*Treasurer*  
 Marie Selder  
*Assistant Treasurer*  
 Arlys Berry  
*Historian*  
 Betty Bradshaw  
*Hospitality & Publicity*

**ST. VINCENT HOSPITAL ALUMNAE  
 ASSOCIATION PAST PRESIDENTS  
 (NURSING ALUMNAE ORGANIZED  
 1912)**

Martha Sheridan Benedict  
 Emma Berge  
 Evelyn Howard Conner  
 Frances Erickson Day  
 Blanche Sero Gault  
 Harriett Osborn Jeckell  
 Joan Baylink Jones  
 Louise Hanky Marsh  
 Helen McCusker  
 Rufina McDonald  
 Margaret Wait Peterson  
 Joanna Howard Sering



Georgia Wilson Shoemaker  
Delores Hegge Smith  
Carol Zeller Swendsen  
D. Rennie Wallo

1975 ST. VINCENT HOSPITAL  
ALUMNAE ASSOCIATION OFFICERS

D. Rennie Wallo  
*President*  
Helen Westendict Moffenbeier  
*Vice President*  
Sally Morrow Underhill  
*2nd Vice President*  
Helen Connor Dunham  
*Secretary*  
Gene Connors Crater  
*Treasurer*  
Margaret Wait Peterson  
*Director*  
Dorothy Vardanega Kennedy  
*Director*  
Joan O'Keefe Currie  
*Director*  
Diane Vardanega Misfeldt  
*Director*  
Mary Chambers Parry  
*Sergeant-at Arms*  
Harriett Osborn Jeckell  
*Consultant*

PHOTOGRAPHIC CREDITS  
SISTERS OF PROVIDENCE ARCHIVES

VIII	66
X	76
26	81
29	82
30	89
33	97
40	98
44	100
52	103
55	104
73	

OREGON HISTORICAL SOCIETY

16	62
20	65
39	70
49	73
56	86
61	94

ST. VINCENT FILE

108 & 109
106
107

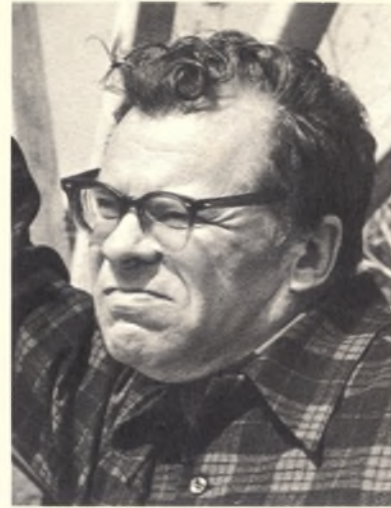
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Portland, Oregon, U.S.A.  
Binding, Lincoln & Allen,  
Portland, Oregon, U.S.A.

## ABOUT THE AUTHOR

ELLIS LUCIA ranks among the best-known and most prolific authors in the Pacific Northwest. He has fourteen books to his credit and his articles and feature stories have appeared in more than a hundred magazines and newspapers, including the *New York Times*, *Washington Post*, *The Oregonian Northwest Magazine*, *Oregon Journal*, *Empire*, *Westways*, the *Ford Times*, *Argosy*, *True*, *Sunset*, *Parade*, *American Forests*, *Family Weekly*, and the *Congressional Record*. A native of California, Mr. Lucia has resided in Oregon most of his life. He began his writing career as a newspaperman, but since 1952 has pursued the world of letters as a freelance writer and author, specializing in his beloved West, past and present-day. His *Owyhee Trails* won the 1974 Wrangler award for non-fiction history from the Western Heritage Foundation of the National Cowboy Hall of Fame. He was also awarded in 1965 an honorary degree Doctor of Letters from Pacific University. Mr. Lucia's special interest in the field of Western Americana has been digging out significant stories and personalities that have been largely overlooked, and it was this interest which brought his attention to the unusual story of the Sisters of Providence and the founding of St. Vincent Hospital. Mr. Lucia and his wife Elsie reside in Portland.







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