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The First Civilian Hospital in St. John’s: Riverhead Hospital, 1814–1888

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Introduction

The first civilian hospital in St. John’s, located at the River Head (currently Victoria Park), came to a flaming end in 1888, after 74 years of service to the city’s indigent sick and homeless. The hospital was demolished by a controlled burning, overseen by Fire Superintendent Winsor and Councillor Power of the newly formed St. John’s Municipal Council (Evening Telegram [ET], 29 Dec. 1888, 4; Municipal Act, 1888, Legislative Acts of Newfoundland 1888, c. 5, s. 1). Superintendent Winsor, along with several fire companies, supervised the careful burning in the early hours of Saturday, 29 December 1888. They wanted to ensure its destruction did not attract the public so they chose to conduct their mission at night. The bells of the attending horses and fire engines were muffled to help decrease the risk of attracting onlookers. First, the roof was removed to decrease the potential of fire spreading to nearby houses. Then several hoses sprayed around the building to prevent the generation of too much heat. A steam engine was placed near the river to ensure a steady supply of water in addition to the water supplied from nearby hydrants. Superintendent Winsor was ready to set it aflame at midnight but decided, in consultation...
with Councillor Power, to wait until the wind died down. By 4 a.m.,
the hospital was set alight. It burned at a low flame until 7 a.m., ensur-
ing that “every board of the infected mass passed through the ‘ordeal
of fire’” (ET, 29 Dec. 1888, 4; The Colonist [TC], 31 Dec. 1888, 4).

Since 1814, when the hospital was built, until its demise in 1888,
the hospital had gone from being the object of excitement and salva-
tion to being an object of disdain and pity. Despite its sorry end, its
early establishment distinguishes it from other public hospitals found-
ed throughout British North America. The Riverhead Hospital1 was
one of the earliest permanent public hospitals to be built and operated
in British North America. It opened its doors to treat patients in 1814,
predating the operation of the first public hospitals in Toronto (York at
the time) — 1829, in Saint John — 1865, and in Halifax — 1867 (Ba-
yard 1896, 4; Connor 2000, 15; Stewart 1968, 51). It also predated the
opening of the Montreal General Hospital, which began operations in
1821, though Montreal’s Hôtel-Dieu Hospital, founded by French
colonists in 1645, was Montreal’s first public hospital (Hanaway 2016).

The following discussion provides a sketch of the Riverhead Hos-
pital’s history, focusing on its structure and location while briefly de-
scribing its role in the community. This research note does not deal
with the broader political history of nineteenth-century hospitals in
St. John’s and the rest of British North America, although this would
be an interesting subject for future research.

**Origins of the Hospital**

At the turn of the nineteenth century, St. John’s was growing. The
population had grown from approximately 1,000 permanent residents
in the mid-eighteenth century to over 10,000 by 1815 (Baker 2019).
The 1794 census of St. John’s prepared for the Colonial Secretary’s
Office shows the population was made up of fishermen, carpenters,
butchers, planters, laundresses, and other manual labourers, among
others (“An account of inhabitants” 1968; Newfoundland’s Grand
Banks 2006). Living conditions were rough. The population was
concentrated in an area made up of tenements near the harbour, above present-day Duckworth Street. The tenements were crowded together and made of wood, creating a dangerous fire hazard. Human waste and garbage, fish offal, and manure were deposited in the streets between the tenements (Baker 1980, 15). Joseph Banks, the eminent English naturalist, described St. John’s in 1766 in his diaries as “the most disagreeable town” he had ever visited. He continued in his entry for 16 October:

Built upon the side of a hill facing the harbour containing two or three hundred houses and near as many fish flakes interspersed which summertime must cause a stench scarce to be supported . . . . For dirt and filth of all kinds St. John’s may in my opinion reign unrivalled as far as it exceeds any fishing town I saw in England. Here is no regular street the houses being built in rows immediately adjoining to the flakes. Consequently[,] no pavement[,] offals of fish of all kinds are strewd about, the remains of the Irish mens [sic] chowder who you see making it skinning and gutting fish in every corner. (Lysaght 1971, 146–47)

Living conditions for the population would have been ripe for injury and illness. Yet, there was no hospital for civilians, no pharmacy, and the few medical doctors in the area were associated with the British military and navy. People of means were treated for illness at home, but there were few options for the sick poor (ENL 1991, 419–20; ENL 1991, 493–94). In 1808, residents of St. John’s petitioned the governor, without success, to build a civilian hospital (Janes 1984, 1042). St. John’s had no municipal governance at this time. Rather, the colony of Newfoundland was governed by non-resident naval governors who represented Great Britain’s interests (Higgins 2009).

The 1808 petition was brought the same year that Dr. William Carson arrived in St. John’s from Birmingham, England. Dr. Carson, who became a significant political figure in Newfoundland and
Labrador, was a medical doctor trained at the University of Edinburgh (ENL 1984, 359). After leaving medical school he practised medicine in Birmingham, where he was influenced by two English Whigs, Charles James Fox and Charles Grey. In all likelihood, this influence informed Dr. Carson’s future political pursuits in the colony of Newfoundland, where he sought reform of political institutions so they would be more responsive to the pitiful state of the colony’s poor. Armed with his sense of decency and justice along with his skills as a doctor, Dr. Carson quickly became involved in the fight for a civilian hospital for the sick poor of St. John’s (ENL 1984, 360; O’Flaherty 1988). In 1810, he persuaded the Society for Improving the Condition of the Poor of St. John’s to strike a committee to plan for and establish a hospital for the sick and infirm of St. John’s. The Society was a charitable organization formed in 1803 by local merchants and religious leaders at the urging of the then governor, Sir James Gambier. Gambier wanted the Society to address the schooling needs of poor children in St. John’s. It grew to include other charitable initiatives. Sir John Duckworth, the reigning naval governor, became president of the Society in 1810 and was present at the meeting when the hospital committee was struck (Fleming 2016, 49; Janzen 2001; Royal Gazette and Newfoundland Advertiser [RGNA], 9 Aug. 1810, 3).

The establishment of a hospital that would serve the poorest people of St. John’s was on its way. On 30 September 1811, Duckworth, who was already aware of the hospital initiative due to his participation in the Society for Improving the Condition of the Poor of St. John’s, provided an enthusiastic assent to the construction of the hospital. He proclaimed that the hospital would be paid for by subscription of the “richer part of the community.” Further, a tax of one penny per pound of wages would be imposed on every fisherman, seaman, and servant who would, in Duckworth’s opinion, benefit from the hospital and a tax of one shilling was to be collected from every seaman entering the port of St. John’s. Duckworth would be the president of the hospital and would have a right to recommend patients to the hospital (D’Alberti Papers 1813, 164–65; RGNA 28 Sept. 1815, 2;
Despatches from the Governor of Newfoundland to the Secretary of State [DGN] 1800–1813, Vol. 1, 406). The next step was for the grand jury to appoint a committee of nine men, one of whom was Dr. Carson, to oversee the construction of the hospital. The grand jury, a group of men associated with the Supreme Court of Newfoundland, had begun to take on legislative functions in the late eighteenth century (Post 2019, 170–74). One of the construction committee’s first actions was to take out ads in the local newspapers to inform the people of St. John’s about the tax on workers to raise funds for the hospital (RGNA 14 Nov. 1811, 2).

**Grant of Land**

After securing a promise for funding, the next step was to find a location for the new hospital. The construction committee requested that Duckworth grant a piece of land for the new hospital building, and on 7 October 1811 Duckworth, on behalf of the British government, granted the land where Victoria Park is now located. The grant expressly stated that the land was granted as long as it was used for the purpose of the hospital and a garden. The land was described as “near Monday Brook on the side of the Road leading from Saint John’s towards the River Head” and continued with a description of specifications as to the size of the grant (D’Alberti Papers 1811, 249). The land granted was outside of St. John’s proper in 1813, the year construction began. An 1888 newspaper article described it as “in the country” surrounded by a green forest when it was constructed (TC, 31 Dec. 1888, 4). Its location is clearly shown on an insurance map from 1880, though by that time the hospital was known as the “Fever Hospital” (Figures 1a and 1b).
Figure 1a. Excerpt from St. John’s Insurance Plan 1880 showing the location of the “Fever Hospital,” as the Riverhead Hospital had become known, at the western end of Angel Place (Chas. E. Goad Co., 1880).
Construction of the Hospital

The construction of the hospital officially commenced on 4 June 1813 with the laying of the cornerstone by the governor, Sir Richard Goodwin Keats. It was clearly an important occasion, with notice of the event appearing in the newspaper beforehand (RGNA, 3 June 1813, 3). At 2 p.m. on the appointed day, a procession of the city’s dignitaries and important citizens, two by two, made their way from the St. John’s courthouse, located approximately at the site of the current courthouse, to the construction site (Supreme Court of Newfoundland and Labrador 2020). The parade included the foreman of the grand jury, the chief justice, the chaplain to the flag ship, magistrates, naval and military officers and their surgeons, public officials, the master carpenter carrying the plan for the building, masons, constables, and others who made the two-kilometre walk to the site. The chief justice made a speech highlighting the benefits to the public of such an institution. As was the tradition, several objects were deposited in the cornerstone at the time of the ceremony. The objects included a plate engraved with the following inscription:
The Foundation Stone of the Newfoundland Hospital was laid by His Excellency Sir Richard Goodwin Keats, on the 4th of June, in the year of our Lord, 1813, and in the 53rd year of the Reign of our sovereign Lord the King, in presence of a numerous assemblage of the friends of the Institution.

Two coins — one gold and one silver — minted during the reign of the then current monarch, George III, and a copy of The Royal Gazette were also deposited in the cornerstone (RGNA, 10 June 1813). Interestingly, no mention was made of the cornerstone or its contents in the newspaper articles describing the burning of the hospital in 1888. Were the contents of the cornerstone removed before the burning? Or would the contents have been forgotten and neglected? The ceremony of laying the cornerstone and depositing a “time capsule” in it would presumably have been well known. Someone may have assumed there was value in the contents of the cornerstone and removed them before the burning. On the other hand, perhaps the plate and coins were buried in the fire rubble and still remain underground in Victoria Park.

The wood for building the hospital came from an area known as McMurdo’s farm, according to an 1888 newspaper article (TC, 31 Dec. 1888, 4). The reference to “McMurdo’s farm” was likely a contemporary reference since Thomas McMurdo, a Scottish pharmacist, did not immigrate to St. John’s until 1834. In 1888 he was the owner of a farm known as the Grove Hill Farm located in the present-day Waterford Bridge Road area (McAlpine 1898). If the McMurdo’s farm referred to in the 1888 article is the same as McMurdo’s Grove Hill Farm, then the wood for the hospital would likely have come from this area. The wood was apparently of superior quality since the fire captain in charge of the building’s fire demolition in 1888 was quoted as saying the hospital’s timber was as sound as if it had been cut the year before (TC, 31 Dec. 1888, 4).

The Hospital Committee published a statement of the first hospital accounts, including the expenditures incurred in the construction of the
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hospital and its operation up to 1 September 1814, in the *Royal Gazette and Newfoundland Advertiser* (Figure 2) (17 Nov. 1814, 4). The list of expenditures included both material and labour costs. The list of material can provide useful information as to whether anything might have survived the demolition by fire and remains buried at the site. Some materials that may have withstood the demolition include bricks, nails, hardware such as locks and hangers from Bristol, grates, and shingles.

![Figure 2. Newfoundland Hospital accounts as of 1 September 1814 showing materials used in the hospital construction (RGNA, 17 Nov. 1814, 4).](image)
The Finished Hospital

The construction of the hospital was completed and ready to receive patients in May 1814 ([RGN], 28 Sept. 1815). Dr. Carson continued to play an important role in the life of the hospital; he and Dr. Nicholas Power were appointed as the first medical superintendents of the hospital. They were not resident physicians but attended at the hospital as necessary (Janes 1984, 1042). The completed hospital likely resembled what was identified as the Riverhead Hospital by archaeologist Gerald Penny (2010, 45) in a sketch of the River Head area (Figure 3). Though Penney identifies the sketch as being representative of the area circa 1847, it could be earlier since it shows the hospital before the north wing was added. The north wing was added in the 1830s (Janes 1984, 1043). A later image of the hospital, after the addition of the north wing, can be seen in a panorama of the south side of St. John’s, dating from some time before 1888. This may be the only photograph available of the Riverhead Hospital (Figure 4).

Figure 3. Sketch (unattributed) showing the River Head area with the Bennet brewery complex. According to archaeologist Gerald Penney, the Riverhead Hospital is at top right (with the steeple) (Penney 2010).
Though the hospital had just opened in May 1814, the hospital accounts as of September 1814 already showed a debt of approximately £455. Despite its ceremonious beginning, the hospital started off underfunded. By 1825, the hospital was funded almost exclusively by the British government — a concerning situation for a government bent on fiscal constraint in its colony (D’Alberti Papers 1825a, 249, 256; DGN 1825–26, Vol. 6, p. 64).
The Patients

Patients were admitted to the hospital shortly after its opening. By September 1815, just 16 months later, approximately 200 patients had been admitted to the hospital for both medical and surgical “relief.” The patients were from both St. John’s and the outports. Funding, however, remained an issue. The newspaper reported that the funds raised by subscription, taxes, and donations made by the Benevolent Irish Society were not sufficient to prevent charging the patients for food and that, from thence forward, each patient would be charged three shillings on top of medical care costs (RGNA, 28 Sept. 1815, 2).

A mere six years after opening, the number of patients in the hospital had been reduced to four, a result of attempts by the governor to curb hospital costs. Sir Charles Hamilton, Newfoundland’s second resident naval governor, was “embarrassed” by the hospital’s expenses and had made a concerted effort to reduce them (Heritage Newfoundland and Labrador 2000). The priority did not appear to be the health of the people for whom the hospital was intended. Rather, Hamilton’s focus, in his communication to the British government, was the elimination of any financial burden on the government. In his opinion, the only options were for the government to carry the cost of the hospital or to remove the four remaining patients.

If all patients were to be removed, the building would no longer operate as a hospital and thus, in accordance with the property grant, the land and building would revert back to the government. At this point, the inhabitants of St. John’s were no longer paying the penny on the pound required in Duckworth’s 1811 proclamation; the law had proven to be unenforceable because there was no penalty for non-compliance. Hamilton admitted the law was a failure. The only path forward seemed to be the support of the government — though Hamilton acknowledged the absentee landowners in England would oppose such support. Absentee landowners owned a lot of the commercial and residential property in St. John’s which they rented out to local inhabitants, and they regularly fought attempts at taxation on their properties
and were not generally interested in the well-being of the colony’s residents (Baker 1986, 166). Six months after Hamilton’s communication, the Earl of Bathurst at Downing Street, on behalf of the Lord Commissioners of Treasury, replied that unless the inhabitants were willing to support the hospital, the building should be appropriated and used for some other purpose or sold (DGN 1818–21, Vol. 4, p. 130; DGN 1820–25, Vol. 3, p. 41). Sympathy from the British government for the sick poor in St. John’s was sorely lacking. The hospital, however, continued to operate. No hospital records remain to provide details about the patients admitted to the hospital or the treatment they underwent (O’Brien 1989, 148). Various other sources, however, provide some insight into the illnesses people suffered from in nineteenth-century St. John’s; it is likely that the Riverhead Hospital hosted patients with such illnesses over its lifetime.

Representations by the district surgeon to the governor in 1825 described overcrowded conditions in the Riverhead and the prevalence of the “Fever” among the patients (D’Alberti Papers 1825b). Cholera did not show up in St. John’s until later, but another cause of fever at the time might have included typhus (Baker 1983, 26–29). Dr. Carson reported to the Royal College of Physicians in 1830 that infectious diseases such as the measles, smallpox, tuberculosis, typhus, and cholera were carried into St. John’s by passengers on ships arriving from Ireland. Though Dr. Carson commented that the outbreaks in St. John’s were usually mild, it is likely that the Riverhead Hospital hosted patients with such diseases (Carson 1830). It can also be assumed that patients with traumatic injuries were admitted to the hospital, given that the poor in St. John’s would likely have been labourers working in dangerous conditions, leading to severe and life-threatening injuries. A report on the 381 patients admitted to the hospital in 1865 listed an array of illnesses, including fever, smallpox, diphtheria, diseases of the stomach, bowel, liver, kidneys and bladder, frost-burn, cancer, venereal disease, accidents, and delirium tremens (Journal of the House of Assembly of Newfoundland 1866, App. 592–93).

Patients with mental health disorders were also admitted to the
Riverhead until 1847. Dr. Henry Hunt Stabb, an Edinburgh physician who emigrated to St. John's in 1838, was a strong advocate for the humane treatment of individuals with mental illnesses — a novel idea at the time. He was a compassionate man, horrified by what he saw in the Riverhead Hospital when he first arrived. Dr. Stabb observed that the “violent insane” were chained to benches and walls in the basement. He noted there was no heat in the basement in the winter and the patients’ food was delivered to them in tin cups attached to long poles. The “chronic insane” and “idiots” were housed on the second floor next to those with communicable diseases. Dr. Stabb called such conditions for those with mental health issues a “crime against humanity” (Baker 1984, 60–61; O’Brien 1989, 25–27).

In addition, the Riverhead had also been used as a poor house over the years, housing the homeless and indigent alongside the sick and often contagious patients until the 1850s. After that time, the poor were housed in camps at the local military garrison, Camp Townshend, until finally a poor house was constructed near the Riverhead Hospital in 1861 (Janes 1984, 1043; O’Brien 1993, 375).

Many of the names of the patients at the Riverhead Hospital and the details of their treatment are likely lost forever as no patient records are available. It may be possible, however, that a name can be put to one of its patients. Shanawdithit, the last known Beothuk in Newfoundland, died 6 June 1829 from what was reportedly tuberculosis. Though it is generally accepted that she died in the St. John’s Royal Naval Hospital on the south side of St. John’s harbour (O’Neill 2003, 734–35), there is no evidence substantiating this assertion. Moreover, the assertion is doubtful since Shanawdithit died in 1829 and the Naval Hospital reportedly closed in 1825. Jessica Munkittrick (2015, 50) first noted this discrepancy in her thesis examining the skeletal remains of individuals (not including the remains of Shanawdithit) buried in the early southside cemetery next to the former site of the Naval Hospital. Of further interest is Shanawdithit’s obituary (Figure 5). The obituary reports that she died “at the Hospital,” with no mention of it being the Naval Hospital, and, as noted earlier (see fn 1), the Riverhead
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On Saturday night, the 8th inst. at the Hospital, Conception Bay District, the female Indian, one of the Aborigines of this Island, died of consumption, a disease which seems to have been remarkably prevalent among her tribe, and which has unfortunately been fatal to all who have fallen into the hands of the settlers.

Since the departure of Mr. Cornack from the island, this poor woman has had no shelter afforded her in the house of James Simms, Esq. Attorney General, where every attention has been paid to her wants and comfort; under the able professional advice of Dr. Carson, who has most kindly and liberally attended her for many months past, it was hoped that her health might have been re-established. Lately, however, her disease had become daily more formidable, and her strength had rapidly declined, and a short time since, it was deemed advisable to send her to the Hospital, where her sudden decease has but too soon fulfilled the fears that were entertained for her.

With Shanawdithit the last of the Native Indians of the Island; indeed it is considered doubtful whether any of them now survive. It is certainly a matter of regret that those individuals who have interested themselves most to support the cause of science and humanity by the civilization of these Indians, should have an unfortunately failed by this sudden termination to their hopes. They have, however, notwithstanding the calculating apathy with which their views have been met by some, the satisfaction of knowing, that their object has been to mitigate the sufferings of humanity, and that at least they have endeavored to pay a portion of that immense debt which is due from the European settlers of Newfoundland to those unfortunate Indians, who have been so long oppressed and persecuted, and are still almost exterminated.

Figure 5. Obituary of Shanawdithit, the last known Beothuk on the island of Newfoundland (Conception Bay Mercury, 19 June 1829).
Hospital was referred to in several ways, including simply the “Hospital.” Shanawdithit was also under the care of Dr. Carson, who had been appointed one of the Riverhead Hospital superintendents at its inception; this begs the question — would Dr. Carson not have continued his care of her in the only civilian hospital at that time, and of which he had been a superintendent? Although it may never be confirmed in which hospital Shanawdithit died, further research may confirm that she did not die in the Naval Hospital, if that hospital no longer existed at the time of her death. This could leave the Riverhead Hospital as a likely candidate for where she passed her final days.

The Workers

The Riverhead Hospital provided a place for the “poor sick” in St. John’s and the surrounding region, but it also provided a place of employment for St. John’s residents as well as a source of revenue for those selling goods and services to the hospital. A Journal of the House of Assembly entry for 1847 included a balance sheet dated 31 December 1847 (Figure 6) showing the hospital’s expenses for that year. The balance sheet shows the names of employees at that time and the kinds of goods and services provided to the hospital in that year. Jonas Barter provided coffins, while S. Perfect was compensated for digging the graves into which the coffins of deceased patients were lowered. A number of women, such as Mary Ryan, Kate and Jane Walsh, and Amelia Goff, were paid wages, which may have been for nursing services, while Mrs. Howlin was paid for washing services. W. Bond, Nelder and Carter, and T. Westcott provided carpentry, masonry, and funnelling services, respectively, while the Bowring Brothers sold blankets to the hospital, and Langley and Tessier provided wine (Journal of the House of Assembly 1848–49, App.).

The Continued Decline of the Hospital

Various reports over the decades deplored the state of the hospital. It was severely underfunded, the hospital’s Board of Directors at times
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Figure 6. Balance sheet dated 31 December 1847 showing the hospital's expenses for 1847 (Journal of the House of Assembly 1848–49, App.).
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did not appear capable of undertaking its responsibilities, and its facilities were deemed to be inadequate to care for patients. The colonial government finally took over the financial responsibilities for the hospital in 1855 (Janes 1984, 1044). Ten years later, the government decided the state of the Riverhead Hospital, for both patients and staff who lived at the hospital, merited an inquiry. On 9 May 1865, through the Board of Works, the governor in residence, Anthony Musgrave, appointed a commission of four physicians, Thomas McKen, Henry Hunt Stabb, Charles Crowdy, and Henry Shea, to investigate the circumstances of the hospital and make recommendations as to possible remedies. A little more than four weeks later, the Commission of Inquiry into the Sanitary State of the Hospital tabled its report in the House of Assembly. The report provides a thorough description of the hospital and paints a vivid picture of the building and the conditions for the patients and live-in staff as of 1865 (Journal of the House of Assembly of Newfoundland 1866, App. 597–600).

The hospital was a two-storey building with a basement. The main part of the building faced south and was divided into east and west wings. A north wing, at right angles to the main building, extended from the east wing. The wings were divided into wards or rooms. Some of the wards were small, gloomy, and lacking light while others were deemed to be satisfactory as to size and lighting. Overall, they were described as “cheerless.” The ceilings were from eight-and-a-half feet to nine feet high, thus not meeting the minimum desirable height of 12 feet, according to the Commission. The wards were heated by closed stoves, a welcome addition in the past but inadequate in 1865. The “generally sick” patients were housed in the east and west wings while those with infectious diseases such as fever and smallpox were housed solely in the north wing. There were no water closets or urinals in the hospital at this time, even though they had been present in the past. They apparently had been closed off due to being “intolerable nuisances.” Outdoor toilets emptied into an onsite cesspool. The Commission recommended immediately abandoning the cesspool and channelling the waste from the toilets to a main drain. An ash and
refuse house was also located in “dangerous proximity” outside of the hospital. If other outbuildings were present at this time, they were not mentioned in the report. There were no bathing facilities in the hospital — neither baths nor lavatories — which meant there was no means for easily washing or bathing the patients. The hospital had a main water supply, but lacked branches, and therefore water was presumably not available for many purposes throughout the hospital.

The basement of the hospital was damp and “replete with foul air.” Despite this, the basement was a well-used part of the hospital. The kitchens, storerooms, vegetable and coal cellars, the apothecary, nurses’ living quarters, and the physician’s consulting room were all housed in the basement. Thanks to the opening of better facilities for the mentally ill, no patients were housed in the basement at this time. The Commission of Inquiry recommended that the basement cease to be used for any purpose other than for the kitchens. It specifically recommended that the nurses’ living quarters be moved to the ward even though the same report indicated that 50 per cent of the nurses who contracted “fever, from time to time” (presumably from the patients) died from the disease. The Commission blamed the “impure atmosphere” of the hospital on the foul air from the basement. In its opinion, there was no circulation of fresh air in the hospital and little chance for contaminated air to exit. The Commission described it as “stagnant” and “offensive and unhealthy.”

Overall, the Commission recommended that the hospital be closed and a new general hospital be built. It was futile, in its opinion, to spend money to rehabilitate the old hospital (Journal of the House of Assembly of Newfoundland 1866: App. 597–600).

The End Is Drawing Near

After the results of the Commission of Inquiry were made known in 1865, it appeared that the Riverhead Hospital’s life would come to an end. It continued to operate, however, until viable alternatives for hospital care were available. In 1871, male patients of the hospital were
transferred to the former Forest Hill Garrison hospital, which had just become a civilian hospital. The hospital had been used by the Imperial Garrison until it withdrew from Newfoundland in 1870. The former Garrison Hospital was not considered fit to receive female patients, so the female patients were moved to the nearby poor house. But that was not the end of the useful life of the Riverhead. Around the same time the Garrison Hospital was converted to a civilian hospital, typhus broke out in St. John’s. The Riverhead Hospital continued its life as the Fever Hospital, housing the typhus patients (Janes 1984, 1064; Sheppard and Pitt 1984, 868). Its continued existence, however, drew the ire of some members of the public, including the editor of the Evening Telegram. At least one editorial and two letters to the editor were published in the local newspapers in the years before its demise, all but begging that the hospital be destroyed (ET, 15 Mar. 1887, 4; ET, 21 Jan. 1888, 4; ET, 9 June 1888, 4). One letter writer called the building a disgrace to the town and said “if we had a society for the prevention of cruelty to animals, they would not permit a sick canine to be housed in such a crazy, tumble-down rookery” (ET, 15 Mar. 1887, 4). Such was the public perception of the hospital. The critics finally got their wish at the end of 1888.

**Victoria Park**

The end of the hospital meant the beginning of Victoria Park — a new public park for the people of St. John’s. Before the demolition of the hospital in December 1888, the Newfoundland House of Assembly passed the Municipal Act, 1888, which created the St. John’s Municipal Council. As of 1 October 1888, the partially elected Council was given the power to manage and control local affairs. The Act also appropriated the Riverhead Hospital property for the purposes of a public park and then transferred responsibility for the park to the Municipal Council. This meant that once the hospital was demolished, the way was paved for the development of a park for recreational purposes as the Municipal Council saw fit (Municipal Act, 1888, Legislative
Acts of Newfoundland 1888, c. 5). On 5 June 1896, Victoria Park was officially opened. No doubt even by this time, eight years after the demolition, memories of the first civilian hospital in St. John’s were fading. Any remnants of the hospital that might have existed were buried, figuratively and literally, in the past. Those remnants, if any, lie undisturbed to this day, thanks to the continuous use of the former location of the hospital since 1896 as a park.

The first civilian hospital in St. John’s is all but lost to us now, but its memory remains a tribute to the good intentions of those who believed that all people deserved a decent level of health care regardless of their socio-economic status. And, as Paul O’Neill (2003, 237) noted:

Time has negated the Telegram’s opinion, and today the old building would have been a curiosity that would give us priceless insights into medical treatment in the nineteenth century. It would have been an interesting museum, with the implements and memorabilia of the Carsons, Kielley, Warner, Bunting, Crowdy, Stabb, Mcken and the others who walked its corridors and became legendary figures.

Notes

1 The hospital, located at the “River Head,” is referred to variously as the “Newfoundland Hospital,” “St. John’s Hospital,” “Riverhead [and River Head] Hospital,” the “Hospital,” the “Public Hospital,” and the “General Hospital,” depending on the date and the source consulted. Here, “Riverhead Hospital” is used since, because of its location, this is the one name that can be uniquely applied to the hospital.

2 The terms in quotes were used in the nineteenth century and are repeated here for historical accuracy.
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