

## "Women and Seamen Don't Mix:" VD in Canada's Merchant Navy, 1942-1945

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During the Battle of the Atlantic, Canadian officials believed that high rates of venereal disease (VD) among merchant seamen of all nationalities threatened Britain's convoy lifeline. While they did not consider VD a menace comparable to the Axis submarines, ships, aircraft, and mines that sent ships to the ocean bottom, they did view it as a serious problem. This concern stemmed from the importance of Canadian ports in the Allied convoy system and the establishment of a major Canadian deep-sea merchant fleet. The Park Steamship Company, a Canadian Crown corporation created in 1942, became the world's fourth largest merchant fleet by the end of the war, with 176 vessels and 12,000 men.

As a group with a high rate of VD infection, merchant sailors offer an excellent means to study venereal disease in the mid-twentieth century. The only Canadian monograph on the subject, Jay Cassel's *The Secret Plague: Venereal Disease in Canada, 1839-1939*, ends at the outbreak of the Second World War.<sup>1</sup> Cassel examined the rise of education, free diagnosis and treatment as the three planks in the government's anti-VD policy and argued that these measures established the manner in which Canadian authorities have dealt with VD ever since. Allan Brandt's book, *No Magic Bullet: A Social History of Venereal Disease in the United States Since 1880*, studied the impact of American sexual and larger social attitudes on governments' approach to VD and concluded that anti-VD programmes served social purposes, mainly to control sexual activity.<sup>2</sup>

This examination of the efforts to control VD among merchant seamen focuses primarily, but not exclusively, on the Canadian merchant navy. The records of those Canadian government departments and officials closest to the seafaring industry, primarily the Interdepartmental Committee on Matters Relating to Merchant Seamen; its Subcommittee on Medical and Health Questions; and the files of Arthur Randles, the Director of Merchant Seamen and Chair of the Interdepartmental Committee form the basis of the study.<sup>3</sup> Ship logs from Canadian merchant vessels complement these institutional sources and provide a glimpse of VD's impact at the ship level.

These sources indicate that the rate of VD infection among merchant sailors increased during the war. On shore, government officials were more concerned that increasing VD rates would heighten manpower shortages, delay vessels, and interfere with the war effort than they were about threats posed to public health or morals. To reduce the incidence of VD, Canadian bureaucrats largely followed the prewar anti-VD policy of education coupled with free treatment. But the authorities introduced changes to the control

programme, demonstrating that the wartime crisis led to some important alterations in attitude and approach. At sea, several incidents involving VD demonstrate the lack of sympathy shown by ship officers, difficulties diagnosing the diseases, and occasional misunderstandings of the way in which VD spread. While this study may help sustain a stereotypical image of the merchant sailor as a dissolute Jack Tar figure, VD nevertheless remained an important reality in their lives.

When war transformed Canadian ports into part of the war's frontline, the number of seafarers entering the country increased dramatically. For example, in the year ending 31 March 1938, 2199 foreign-going vessels, manned by 76,570 sailors, arrived in Canadian ports. In 1942, 3392 vessels and 134,418 men docked in Canada.<sup>1</sup> As the number of sailors entering Canadian ports increased, so did the importance of the work these men performed. The vital need to keep the ships sailing to Britain meant that Canadian shipping officials quickly viewed venereal disease as a serious and increasing problem.

It is impossible to determine with any certainty how many wartime sailors contracted VD. The vast majority of cases would have gone unreported and no separate statistics were kept for Canadian seamen. The scattered figures that do exist provide some indication of the problem. During the 1941-1942 fiscal year, Canada's Sick Mariner's Service treated 4459 seamen for VD.<sup>5</sup> These cases comprised 13.8% of the total illnesses treated by the Service, up sharply from 1938 when roughly 700 cases constituted 7.8% of total illnesses.<sup>6</sup> Of course there is no way to know how many infected sailors failed to seek treatment in Canada. During the 1942-1943 fiscal year the Sick Mariner's Service treated 2730 VD cases, 11.9% of the total illnesses.<sup>7</sup> This decline failed to eliminate concern over the issue. At the 8 February 1944 meeting of the Interdepartmental Committee on Matters Relating to Merchant Seamen, Dr. C.P. Brown of the Department of Pensions and National Health announced an increase in the number of VD cases diagnosed in Canadian ports and quoted a confidential American report that claimed increasing numbers of US sailors contracted syphilis in Halifax.<sup>8</sup> Not surprisingly, other groups connected to the industry shared the government's belief that a serious problem existed in the Park fleet.

Leaders of the Canadian Seamen's Union (CSU), which represented the unlicensed ratings on Park vessels, perceived the rate of infection among their membership as unacceptably high. Lacking hard data, the CSU relied on anecdotal evidence to form its perceptions. For example, in May 1944 the union's newspaper, *Searchlight*, reported that one hundred cases of venereal disease of "an advanced nature" had recently been reported by Park ships returning to the East Coast.<sup>9</sup> CSU leaders also recounted the example of a Park vessel that had returned to Canada with seventeen of its fifty-one crew members infected.<sup>10</sup>

Even without reliable statistics, Canadian government officials identified two main problems associated with VD. Of course, authorities were concerned that infected seamen threatened the health of port communities. A Sub-Committee of the Interdepartmental Committee studying the health of sailors discussed a plan to deny infected sailors shore leave but did not consider it "practical or advisable."<sup>11</sup> Norway's unauthorised establishment of a thirty-five bed treatment centre in Nova Scotia for ill Norwegian sailors, including those infected with VD, also demonstrates health concerns. Angry at this unauthorised move, Canadian officials complained that, "[t]he provisions for segregating these men from contact with the civilians while undergoing such treatment are entirely inadequate. This constitutes a menace to the health of our people."<sup>12</sup> Yet the authors of the memo seemed almost as

concerned with the danger to public health posed by tuberculosis patients." Instead of health issues, most bureaucrats focussed their attention on the threat VD posed to shipping.

Members of the Interdepartmental Committee feared that VD "casualties" would heighten manpower shortages and delay vessels. When Norway first requested the right to land syphilitic seamen in Canada, members of the Interdepartmental Committee worried that "[t]o comply with the request would probably involve other Nations sharing the privilege and there is a danger thereby that some ships would be immobilized through crew shortages."<sup>14</sup> On 31 July 1942, members of the Sub-Committee on Medical and Health Questions concluded that requests to treat infected seamen in Canada could be approved, providing certain conditions were met.<sup>15</sup> The very first demand stipulated that a sailor's entry into treatment would not delay his vessel.<sup>16</sup> Of course, the government also took measures to protect the Canadian public. Sailors could be treated only in ports where they could be detained and Immigration Inspectors had to be informed of any breaking of detention.

Other evidence demonstrates that manpower concerns rated higher than health issues. The Sub-Committee on Health proposed that the discharge of infected men for treatment be subject to the approval of the Naval Control Service to prevent shipping delays." In the fall of 1944 Randles examined treatment facilities in Liverpool reserved for Canadian sailors infected with VD and reported that due to a lack of sulphur drugs, Canadian sailors required five to six weeks of shore-based treatment and had to be replaced.<sup>18</sup> Randles seemed more concerned with the possibility of ships being delayed than in securing the most up-to-date treatment for seamen. Most government officials seemed to believe concerns about physical or moral decay were not as important as the need to keep ships sailing.

Regardless of their motivations, shipping officials investigated ways to reduce the incidence of VD among seafarers. In 1942, Dr. Brown met with provincial health officers in Québec, New Brunswick and Nova Scotia. In addition to the standard facilities for free treatment, he reported that health officials and the Sick Mariner's Service cooperated to trace sexual partners when sailors believed they contracted VD in Canada. Upon learning of a suspected carrier, provincial health officials worked with police to detain the person for examination and treatment. Dr. Brown concluded that each province operated a "well-organised venereal disease control service" and "from the information given to me, is eliminating many infected persons."<sup>19</sup>

Despite this optimism, the actual effectiveness of contact-tracing must be questioned. Other attempts to trace sources of infection enjoyed little success during either world war.<sup>20</sup> An examination of Nova Scotia's trace-back programme reveals several shortcomings. One doctor stated that officials had "to be cautious" and "have more than one man report on a particular girl" before they could take action.<sup>21</sup> Even the identification of sexual partners presented difficulties. When questioned, sailors rarely knew (or would divulge) the full names of their sexual partners. Shortages of experienced social workers to trace the sources of infection also hampered control efforts.<sup>22</sup> Yet despite these shortcomings, shipping officials seemed content to rely on such provincial programmes.

These efforts did not satisfy CSU leaders, who pressured the Canadian government to do more. In May 1944 the CSU took matters into its own hands and launched an education campaign.<sup>23</sup> The union newspaper ran a series of articles written by government health officers.<sup>24</sup> In June 1944, the union organized a week-long blitz of film screenings and lectures. This education campaign meant that a labour union nearly took over what previously had been a key element in government anti-VD strategy. While the campaign

relied heavily on government sources, it remains significant that union channels brought the information to Canadian seamen. While CSU officials were concerned about the health of their members, their anti-VD campaign also seems to have been driven by the need to keep ships sailing on time.

The CSU's efforts spurred Randles to organise film screenings and lectures in the manning pools. He also had health officials rewrite a Canadian military VD pamphlet for merchant seamen.<sup>25</sup> This rewrite took six months, so distribution of *Facts About VD for Canada's Merchant Seamen* did not begin until December 1944. Over the winter, manning pools, training centres, seamen's clubs, union offices, and members of the Naval Boarding Service distributed 50,000 copies (all in English) of the pamphlet.<sup>1</sup> Apart from this booklet, the CSU shouldered most of the responsibility for educating the seamen of the Park fleet.

CSU leaders also pushed the Canadian government to introduce sweeping VD-testing procedures. Merchant sailors only underwent a cursory medical exam when joining a manning pool, making it relatively easy to enter while infected. Others could enter a pool healthy, contract VD while waiting for a ship, and sail after becoming infected. The fact that not all men used the pools also hampered control efforts. To address these problems the CSU called on government to introduce mandatory medical exams and blood tests each time a sailor signed on or off a ship and to force infected men into a government clinic or hospital.<sup>27</sup>

Remarkably, evidence suggests that in some cases the rank-and-file supported mandatory blood tests. Suspicions that some members of *Lafontaine Park* had VD led the crew to demand that the captain force everyone to submit to a blood test at the next port. The captain compromised by ordering those suspected of infection to submit to blood tests and, if necessary, enter hospital for treatment.<sup>28</sup> Canadian bureaucrats demonstrated a more enlightened attitude towards mandatory testing and rejected the union's suggestion. Dr. Brown reported that the Department of Pensions and National Health thought it impractical to inspect all seamen; he argued that sailors enjoyed free treatment and that the absence of compulsion and detention meant that they "visited the clinics of their own free will and did not hide their condition and trusted the medical officers."<sup>29</sup> As a result of this attitude, merchant sailors never had to submit to the "short-arm inspections" given to Canadian soldiers during the First World War.

The pressure from the CSU to introduce stronger control measures gives some indication that the argument that anti-VD campaigns represented a means of social control is overstated. According to some historians, middle-class reformers exploited VD to demonstrate the moral shortcomings of the working-class and other marginalized groups to regulate not only sexual activity but also society.<sup>30</sup> The lead that CSU leaders took in the control programme for seamen demonstrates that some working-class leaders were prepared to go further than middle-class government officials." The CSU leadership cannot be dismissed as middle-class labour bureaucrats; all were class-conscious workers drawn from the rank-and-file and many were Communist Party members. The actions and opinions of CSU leaders help demonstrate that anti-VD campaigns were more complicated than examples of socially-constructed control measures designed to regulate sexual activity or to demonstrate the inferiority of the working-class. A real rise in the number of VD cases and the perceived threat they posed to the war effort dominated government and union control efforts.

The wartime emergency also helped to change attitudes towards prevention and safer sex. Before the war, government authorities and literature refused to mention condoms

because bureaucrats did not want to promote sexual activity or birth control.<sup>32</sup> The wartime emergency broke down the antipathy towards condoms and many Allied nations distributed them to servicemen and sailors.<sup>33</sup> In 1942 the Interdepartmental Committee advised Canadian shipping companies to make free condoms available to the men working on their ships.<sup>34</sup> At about the same time the two training schools for Canadian merchant seamen and all Canadian manning pools made packages containing condoms available to sailors.<sup>35</sup> Of course, availability did not guarantee use. When an exasperated naval officer asked a Dutch sailor who had contracted VD in Sydney, Nova Scotia "why in Hell he hadn't used a safe," the man confessed that "he found himself too drunk to remember to use one."<sup>36</sup>

Canadian shipping officials also took measures to avoid a public backlash while they worked to ensure the availability of condoms. For example, the government relied on private companies to provide the condoms for Canadian vessels. More significantly, bureaucrats adamantly refused to mention, let alone promote, condoms in any educational literature. Not all officials agreed with this public silence. Captain Eric Brand, the Royal Canadian Navy's Director of Intelligence and Trade, praised a Norwegian booklet's treatment of condoms and called for a "more straightforward approach to the subject, particularly in respect to prevention" in Canadian literature.<sup>37</sup> Randles responded that "the frankness displayed in that document would be abhorrent if described in plain English in our leaflet" and explained that Health Department officials had informed him no government publication could mention condoms.<sup>38</sup> Despite the wartime crisis and the precedent set by Allied nations, Canadian authorities refused to take any public stance which might be interpreted as encouraging sexual activity or birth control.

The reluctance to promote condoms should not be interpreted as proof that attitudes towards sexual activity remained set in stone. Health Department officials displayed more liberal attitudes towards another measure which could be employed to reduce one's chances of infection. When the Montreal Catholic Sailor's Club's Director examined the VD fact booklet, he expressed concern that the statement that "[i]t is not true that masturbation causes VD" would encourage sailors to engage in this risk-free substitute and wanted it qualified or vetted.<sup>39</sup> In fact, Health officials had foreseen such a complaint while drafting the booklet but dismissed it.<sup>40</sup> Regardless of the public position taken towards masturbation or condoms, authorities also had to deal with the supply side of the equation when addressing the VD problem.

As wartime Halifax nearly doubled in size from 65,000 to 120,000 residents, the free market responded and the number of prostitutes rose to meet demand. In 1942, the Royal Canadian Mounted Police (RCMP) investigated the spread of VD in Halifax. According to an RCMP report, seventeen prostitutes (supposedly all French Canadians from Montréal on three-month contracts) worked for one of three madams who ran four brothels in Halifax and one in Dartmouth. It appears authorities were content to regulate instead of repress these brothels. Municipal health authorities examined the prostitutes and always found them disease free.<sup>41</sup> The RCMP concluded that "organized" prostitution did not contribute to the VD problem.<sup>42</sup> Officials in the shipping industry must have shared this opinion because they neither discussed nor called for the repression or further regulation of brothels.<sup>43</sup>

The orderly prostitution situation described by the RCMP report clashes with other accounts of Halifax during the war. As one historian described the city: "Prostitutes trooped into town," and their "trademarks became white galoshes in the gloom of rain-lashed streets, stand-up sex in alley ways, and a sky-high rate of venereal disease."<sup>44</sup> Some contemporary

officials had similar opinions. One Halifax RCMP officer blamed street prostitutes for spreading VD. While noting that financial desperation often led to prostitution, the officer exhibited little sympathy for the women.

The problem does lie in the large influx of young girls from small provincial towns and villages who have come to this Port since the beginning of the war either to work as domestics or for no other reason than to pick up some "easy money." Some of these girls have followed their boyfriends here and have then been stranded when the boys were drafted overseas. To one familiar with pre-War conditions here it is obvious that there has been a definite lowering of the moral standard and one now sees these young girls loitering about cheap cafes and dance halls looking for "pick ups." They live a hand-to-mouth existence.<sup>45</sup>

The officer went on to note that out of fifty street prostitutes examined by doctors, the average age was seventeen and only four did not suffer from at least one venereal disease.<sup>46</sup> If this ninety-two percent infection rate was even close to being representative, the advice to sailors to avoid prostitutes would appear to be well founded and not a simple knee-jerk attempt to preserve morality.

Ship officers and shipping officials also recognized that sailors engaged in sexual activity with women who were not prostitutes. In fact, many blamed young women for the spread of VD among the seafaring population.<sup>47</sup> The first mate on one Dutch vessel docked in Sydney complained to a Naval Boarding Service Officer that "in these small New Brunswick and Nova Scotia ports, young girls come down to the ships and make dates with the sailors." In his report, the officer accused these "young floosies" of sabotage when they infect the men" and lamented a decline of moral standards, writing that "[h]ere in Sydney, in spite of the curfew law young girls can be seen on the main street on the prow looking for pickups. Neglah Beach dance hall is frequented by young girls scarcely in their teens who are allowed to visit these public dance halls unescorted."<sup>48</sup>

Despite these low-level reports, no debate or, more importantly, no action was taken at higher levels to control women, no matter what kind of date they sought from seamen. Nor did all officials blame women for seducing otherwise innocent sailors. A Sydney RCMP officer stated that when considering the "young girl problem...generally the male is to blame."<sup>49</sup> Most higher-level bureaucrats seemed to recognise that women could not be solely blamed for seamen's sexual activity or for spreading VD.

The lack of attempts to repress sexual activity stands in contrast to Canada's position during the Great War when Canadian and other Dominion authorities repeatedly (but without effect) called upon French and British officials to repress prostitution near the front lines. When the Battle of the Atlantic brought WW II's front line to Canada, government officials failed to take strong action to eliminate prostitution.<sup>50</sup> Instead, they relied on educating sailors on the dangers of sex with strangers: "Any girl you can 'pick up' on the street, around a beer parlour, dance hall or hotel probably has VD."<sup>51</sup> Such advice did play on fears and discouraged sexual activity but it also presented concrete (though perhaps unrealistic) means to reduce the risk of contracting VD. Officials never matched their warnings of the dangers of sexual activity with any serious attempts to repress prostitution or control young women.

Despite the occasional lament that the increase in VD represented a decline in morality, officials did not exploit infection rates to justify a "clean-up" of Halifax or any other port.<sup>52</sup>

Attitudes towards sailors had also changed by the outbreak of the war. In the 1920s, for example, some officials suggested that not giving sailors their entire pay packet when they signed off a vessel would reduce the VD problem. By the 1940s this paternalism had largely faded.<sup>53</sup> The public image of sailors had also changed. In the early spring of 1945 the government reissued the VD fact booklet with a plain blue cover after complaints that the sailor pictured on the original cover should be "better groomed and more typical."<sup>54</sup>

Regardless of how a person contracted VD, a wartime medical advance transformed treatment. The discovery in 1943 that penicillin quickly cured syphilis and gonorrhoea represented a dramatic improvement over existing treatments, although shortages meant that the drug did not become available to Canadian merchant sailors on the same quota basis as the armed forces until the spring of 1945.<sup>55</sup> In addition, Canadian hospitals tended to rely on conventional drugs and only turned to penicillin if older drugs proved ineffective.<sup>56</sup> Canadian merchant sailors also spent much of their time in foreign ports with limited access to penicillin, even after the cessation of hostilities.<sup>57</sup> Penicillin transformed VD treatment, but few wartime Canadian sailors enjoyed the benefits of the antibiotic age.

While this study of merchant seamen and venereal disease may reinforce a Jack Tar stereotype, better suited to the age of sail, VD remained a real part of their lives during the 1940s. Logs occasionally offer a fleeting glimpse into VD's impact at the ship level. An examination of some incidents on Park vessels helps illuminate officer and crew attitudes towards infected crew members; difficulties with diagnosis; and the crews' lack of knowledge about VD.

An incident in *Kildonan Park* demonstrates officer attitudes towards infected sailors and diagnosis difficulties. While docked in Colombo on 29 January 1944, an eighteen year-old mess boy named Ellis complained to the chief steward that he could not draw his foreskin back.<sup>58</sup> The captain denied Ellis' request for a doctor and ordered the chief steward to draw the foreskin back, using ice if necessary. The captain immediately diagnosed VD and provided the medical treatment outlined in the vessel's medical guide. Three hours later the ship's three union delegates informed the captain that the crew would refuse to work if Ellis did not see a doctor. The next day twenty-six men from the deck and engine departments refused to prepare the ship to sail. The steward's department performed their duties but told the captain that they supported the crew's action. After the vessel missed its convoy the captain requested a medical officer. The strike ended when a doctor boarded the ship (accompanied by an armed Royal Navy patrol) and discharged Ellis to a hospital.

This case shows how little sympathy some captains had for infected seamen. Only a shortage of available replacements saved the striking sailors from jail and enabled them to secure medical treatment for Ellis. Upon the vessel's return to Canada, government officials viewed the case as a perfect example of the need to enact a law to allow Canadian sailors to be punished for their actions overseas.<sup>59</sup>

The incident also demonstrates the relatively poor level of medical care available to sailors in some foreign ports. While VD remained hard to diagnose, it appears medical incompetence often aggravated the difficulty. Shortly before the captain diagnosed Ellis' complaint, a port doctor had examined him, diagnosed insomnia and chronic constipation, and declared him fit to sail. The quality of some doctors in foreign ports was highly questionable. Earlier in the *Kildonan Park's* voyage tragedy struck when a man died of

smallpox after a doctor had declared him fit to sail. Whatever the reason, mistaken diagnosis aggravated a reluctance of captains to believe crew members' claims to be ill.

Park captains regularly refused to believe claims of illness and fined sailors for malingering. For example, on 21 September 1943 a fireman on *Algonquin Park* reported ill.<sup>60</sup> After a port doctor declared him fit for duty the captain fined him a day's pay for malingering. Two days later, the fireman repeated his claim to be ill and again the captain fined him. On 25 September, the same doctor re-examined the man and recommended he be admitted to hospital for observation. On 2 October, the fireman entered a hospital where doctors diagnosed VD, but the man returned to his ship before it left port. Demonstrating the general lack of sympathy shown towards infected sailors, the captain fined the man on two more occasions when he reported sick.<sup>61</sup> Obviously, at least some officers did not view infection as an excuse to miss work. This case also reveals how some captains attempted to use punitive measures to reduce the number of VD cases on their vessels.

Merchant captains possessed nearly total discretionary power to discipline the men working on the vessels they commanded. As a result some captains used punitive measures to deal with venereal disease and fined men when they could not (or would not) work on account of VD. In the RCN men had part of their pay withheld if they entered hospital for VD treatment; ratings lost about half their salary and officers a smaller percentage. But if the man could prove he caught VD due to no fault of his own, no fines would be levied.<sup>62</sup> No similar official policy existed in the merchant navy and captains could deal with infected crew members as harshly or as leniently as they wished.

During the war, education continued to play its role as the first line of defence against infection, a key difference being the fact that labour union officials largely took over from government bureaucrats. An examination of one element of this education campaign can be used to rate its effectiveness. The campaign directed at seamen emphasized that VD could not be transmitted through clothing, washroom facilities, dishes, or food, all key considerations given the close living quarters on a merchant vessel.<sup>63</sup>

Events on Park ships demonstrate that many sailors either did not absorb or simply ignored this information. Sailors often refused to eat food that had been prepared or touched by a crew member even suspected of being infected with VD.<sup>64</sup> For example, cases of infection in the steward's department led to crew trouble during two separate voyages of *Algonquin Park*. In both cases, members of the crew absolutely refused to eat food prepared by members of the steward's department suffering from VD.<sup>65</sup> The rest of the crew forced these men to remain off duty for about a week. Since many seamen did not understand how VD could be transmitted, despite being targeted for an intensive educational effort, the effectiveness of the campaign must be questioned.

Attitudes towards infected members of the steward's department aside, it appears that the majority of sailors normally viewed VD as a fact of life. Most showed little in the way of either sympathy or fear towards infected crew members. As one International Labour Office report stated, many sailors "seem to believe, whether through ignorance or fatality, that VD is an inevitable evil which it is useless to try to prevent or even cure."<sup>66</sup> The first mate of one vessel agreed with this opinion, complaining that "men just don't bother to take proper precautions."<sup>67</sup> It appears that VD cases were common enough among merchant seamen to reduce much of the stigma and fear normally associated with the disease.

During WW II, Canadian authorities detected an increased incidence of VD among merchant seamen and viewed the outbreak primarily as a threat to the war effort. To address

the problem, the government relied on measures refined during the interwar period, education coupled with free medical treatment. Yet Canadian sailors witnessed notable changes, including an education campaign largely run by a labour union, the distribution of condoms, and the absence of any co-ordinated attempts to repress prostitution. At the ship level, officers had little sympathy for infected crew members and treatment of infected men depended on the captain's attitude. Sailors exhibited little concern for VD in general terms or in specific cases, unless the crew member in question handled food.

Of course, victory over the Axis powers did not eliminate VD. Renamed Sexually Transmitted Diseases (STDs), penicillin-resistant strains of old diseases, as well as new viruses such as herpes and AIDS, remain a problem today. But it is impossible to use Canadian merchant seamen to study reaction to VD in the postwar period. While the history of VD does not end in 1945, the history of the Canadian merchant navy effectively does. In the decade following the end of hostilities, the government sold the Park fleet to private companies, which in turn transferred ownership to flags of convenience and forced nearly all of the 12,000 Canadian deep-sea sailors to find other work. The postwar era was also characterized by changes in the nature of the shipping industry that reduced the time sailors spent in port, effectively ending high rates of venereal disease within the merchant seafaring population.

## NOTES

\* After writing his thesis on merchant seamen, the Park Steamship Company, and the Canadian Seamen's Union and receiving a Master of the Arts Degree from the Queen's University History Department the author left academia to live as an ex-patriate in Japan.

1. Jay Cassel, *The Secret Plague: Venereal Disease in Canada, 1839-1939* (Toronto, 1987).

2. Allan Brandt, *No Magic Bullet: A Social History of Venereal Disease in the United States Since 1880* (Oxford, 1987). Other studies (not necessarily focussed on the twentieth century) include W.J. Brown, *et al.*, *Syphilis and Other Venereal Diseases* (Cambridge, MA, 1970); James Cleugh, *Secret Enemy: The Story of a Disease* (London, 1954); Roger Davidson, "Fighting 'The Deadly Scrouge': The Impact of World War II on Civilian VD Policy in Scotland," *Scottish Historical Review*, LXXV (1996), 83; and Theodor Rosebury, *Microbes and Morals: The Strange Story of Venereal Disease* (New York, 1971).

3. The Interdepartmental Committee, which consisted of representatives from several government departments, met regularly to address any matter relating to merchant seamen regardless of nationality.

4. Canada, *Report of the Work of the Department of Pensions and National Health for the Year Ending 31 March 1938* (Ottawa, 1938), 130; and Canada, *Report of the Work of the Department of Pensions and National Health for the Year Ending 31 March 1942* (Ottawa, 1942), 142.

5. National Archives of Canada (NAC), Record Group (RG) 76, series 1-A-1, vol. 463, file 708755 pt. 1, reel C-10402, "Draft Memorandum Submitted by the Sub-Committee on Health of Seamen for the Approval of the Interdepartmental Committee," n.d. Unfortunately, no separate statistics were kept for Canadian sailors. Nor do these figures include Canadians who sought diagnosis and/or treatment through doctors unconnected to the Sick Mariner's Service or in foreign ports.

6. NAC, RG 76, 1-A-1, vol. 463, file 708755, pt. 2, reel C-10402, Report presented by Dr. C.P. Brown, n.d.; and Canada, *Pensions and National Health Report 1938*, 130. During WWI, when Canadian troops had one of the worst infection rates among the Western powers, syphilis and gonorrhea comprised approximately twelve percent of all sicknesses, exclusive of wounds, treated in the Canadian Expeditionary Force. See Suzann Buckley and Janice Dickin McGinnis, "Venereal Disease and Public Health Reform in Canada,"

*Canadian Historical Review*, LXIII, No. 3 (1982), 338.

7. NAC, RG 76, 1-A-1, vol. 463, file 708755, pt. 2, reel C-10402, Brown Report.

8. NAC RG 76, Series 1-A-1, vol. 463, file 708755 pt. 2, reel C-10402, Minutes, 8 February 1944.

9. *Searchlight*, May 1944.

10. NAC, RG 24, vol. 6852, file NSC 8750-1, vol. 2, "Submission of CSU to Government of Canada," 30 May 1944.

11. NAC, RG 76, 1-A-I, vol. 463, file 708755, pt. 1, reel C-10402, Sub-Committee on Medical and Health Questions, Minutes, 31 July 1942.

12. NAC, RG 76, 1-A-1, vol. 463, file 708755, pt. 1, reel C-10402, "Synopsis of Evidence Illustrating Attitude of Norwegian Authorities in Canadian Ports," n.d.

13. *Ibid.*

14. NAC, RG 76, 1-A-1, vol. 463, file 708755, pt. 1, reel C-10402, Minutes, 2 July 1942.

15. In fact the Canadian government had no choice. On 1 December 1924, Canada and several European countries signed the Brussels Agreement, which bound signatories to provide free treatment to any sailor infected with VD, regardless of nationality. Under the Canada Shipping Act the government assumed responsibility for the care of sick and injured sailors, including those suffering from VD.

16. NAC, RG 76, 1-A-1, vol. 463, file 708755, pt. 1, reel C-10402, "Draft Memoranda Submitted by the Sub-Committee on Health of Seamen for the Approval of the Interdepartmental Committee," n.d.

17. *Ibid.*

18. NAC, RG 76, 1-A-1, vol. 463, file 708755, pt. 2, reel C-10402, Minutes, 14 November 1944.

19. NAC, RG 76, 1-A-1, vol. 463, file 708755 pt. 1, reel C-10402, Report to the Inter-Departmental Committee on Matters Relating to Merchant Seamen, n.d. (circa July 1942).

20. Brandt, *No Magic Bullet*, 162; and Cassel, *Secret Plague*, 142.

21. NAC, RG 12, A-1, vol. 1484, file 8042-14, "Suspected Spreading of Venereal Diseases to Halifax, Nova Scotia," 21 October 1942.

22. NAC, RG 12, A-1, vol. 1484, file 8042-16, C.P. Brown to Arthur Randles, 11 February 1944.

23. During the 1920s the Canadian Shipping Federation, Navy League, and public authorities placed posters "calling attention to the ravages of venereal disease" on ships and distributed pamphlets and leaflets to sailors arriving in port. This literature informed sailors of facilities for free treatment and the "dangers of prostitution." But the campaign ended, along with most of Canada's national VD education programme, when the Department of Pensions and National Health closed its VD Control Division in 1932. See also International Labour Office (ILO), *Protection of the Health of Seamen Against Venereal Disease* (Geneva, 1926), 18.

24. For examples, see *Searchlight*, May, July and November 1944, which basically repeated the information contained in a military booklet rewritten for merchant seamen in December 1944.

25. NAC, RG 12, A-I, vol. 1484, file 8042-16, Randles to Dewar Ferguson, 5 June 1944.

26. The release of the booklet corresponded with a national education campaign aimed at the general population. Between November and December 1944 the Department of Pensions and National Health's VD Control Division (reformed in 1943) placed quarter- to full-page advertisements in over one thousand daily and weekly newspapers and magazines, screened several films, and participated in several radio programmes; see Canada, *Report of the Work of the Department of Pensions and National Health for the Year Ending 31 March 1945* (Ottawa, 1945), 57.

27. NAC RG 24, D-1, vol. 6852, file NSC 8750-1 vol. 2, "Submission of the CSU to the Government of Canada," 30 May 1944.

28. *Searchlight*, November 1944. W.H. Van Allen, acting-director of the Department of Transport's publicity section, claimed that seamen only supported blood testing because they received five days in port to await the results. NAC, RG 12, A-1, vol. 1484, file 8042-16, W.H. Van Allen to D.H.

Williams, 6 October 1944.

29. NAC, RG 76, 1-A-1, vol. 463, file 708755, pt. 2, reel C-10402, Minutes, 13 June 1944.

30. Geoffrey Smith, "Historical Perspectives on Aids," *Best Canadian Essays* (Saskatoon, 1989), 104; and Buckley and McGinnis, "Venereal Disease," 337.

31. CSU leaders also cooperated with health officials. C.E. Lenton, CSU Secretary-Treasurer, represented the Trades and Labour Congress on a government committee to examine Ontario's wartime VD problem. *Searchlight*, November 1944.

32. Cassel, *Secret Plague*, 220.

33. For example, British, Dutch, and Norwegian merchant sailors received free condoms. The wartime medical kit carried on Royal Canadian Navy vessels also contained condoms. See S. Richards, *Operation Sickbay* (Vancouver, 1994), 87. Despite some objections, the US army distributed fifty million free condoms each month to its troops, and demand nearly exceeded supply. See Brandt, *No Magic Bullet*, 164-165.

34. NAC, RG 76, 1-A-1, vol. 463, file 708755, pt. 1, reel C-10402, Sub-Committee on Medical and Health Questions, Minutes, 31 July 1942. In 1947, union leaders secured a provision in the collective agreement that guaranteed that shipping companies would supply free condoms. See "Memorandum of Agreement for Canadian Dry Cargo Freight Vessels As Agreed to by East and West Coast Canadian Shipowners and Canadian Seamen's Union," 15 October 1947, in author's possession.

35. NAC, RG 12, A-1, vol. 1484, file 8042-1, Randles to Brown, 27 April 1942.

36. NAC, RG 12, A-1, vol. 1484, file 8042-14, Naval Boarding Service Report, 27 August 1942.

37. NAC, RG 12, A-1, vol. 1484, file 8042-16, Capt. E.S. Brand to Randles, 14 March 1945

38. NAC, RG 12, A-1, vol. 1484, file 8042-16, Randles to Brand, 19 March 1945. The only reminder to use condoms appeared in *Searchlight*, May 1944.

39. NAC, RG 12, A-1, vol. 1484, file 8042-16, W.H. Atherton to Van Allen, 4 January 1945.

40. NAC, RG 12, A-1, vol. 1484, file 8042-16, Randles to Atherton, 5 January 1945.

41. NAC, RG 12, A-1, vol. 1484, file 8042-14, "Suspected Spreading of Venereal Diseases to Halifax, Nova Scotia," 21 October 1942.

42. *Ibid.* Not everyone believed that brothels did not spread VD. Anger over the lack of government action to control brothels led one unnamed naval base's commanding officer to raid a brothel with a shore patrol. Legend had it the raid netted the city's mayor. See Richards, *Operation Sickbay*, 52.

43. This policy followed prewar attitudes. In 1936 Canadian bureaucrats rejected an ILO proposal to suppress prostitution around dock areas. NAC, RG 12, A-1, vol. 1484, file 8042-16, N.A. Robertson to Randles, 14 July 1942.

44. Tony German, *The Sea is at Our Gates: The History of the Canadian Navy* (Toronto, 1990), 198.

45. "Suspected Spreading of Venereal Diseases to Halifax, Nova Scotia," 21 October 1942.

46. *Ibid.*

47. This placing of blame on young women echoed complaints in other countries. See Brandt, *No Magic Bullet*, 167; and Davidson, "Fighting The Deadly Scrouge," 77-78 and 83.

48. Naval Boarding Service Report, 27 August 1942.

49. NAC, RG 12, A-1, vol. 1484, file 8042-14, F.T. Evens to W. Mortimer, 21 October 1942.

50. In contrast, American officials repeatedly attempted to control prostitution around American bases. See Brandt, *No Magic Bullet*, 161-162.

51. *Searchlight*, July 1944. The VD booklet contained the same statement.

52. The federal government introduced, but failed to exploit, a new measure during the war. In 1944 it stated it would use "facilitation," a new legal means to fight VD. Contact-tracing had linked a disproportionate number of infections to a small number of dance halls, taverns, and hotels. "Facilitation" provided police with unspecified abilities to "deal" with such establishments. Despite the announcement, it does not appear that facilitation

became a common or effective anti-VD measure. *Pensions and National Health Report 1945*, 59.

53. ILO, *Protection*, 70-72.

54. NAC, RG 12, vol. 1484, file 8042-14, Randles to Georges LeClerk, 27 March 1945. The original cover featured a sketch of a bearded man with a large sea bag slung over one shoulder.

55. NAC, RG 76, 1-A-1, vol. 463, file 708755 pt. 2, reel C-10402, Minutes, 15 March 1945.

56. NAC, RG 12, A-1, vol. 1484, file 8042-16, Brand to Randles, 9 April 1945. Nor did penicillin end the need for hospitalisation; a cure required injections every four hours over a ten-day period.

57. NAC RG 12, B-14-C, 1987-88/133, box 56, file 451, *Outremont Park*, log for 19 January-3 June 1946 voyage, 4 March entry.

58. The following story is recreated using the ship log and NBS Reports for *Kildonan Park*. See NAC RG 12, B-14-C, 1987-88/133, box 38, file 305, log entries 29 January and 3 February 1944; and NAC RG 24, vol. 6855, NBS file for *Kildonan Park*, May 1944.

59. NAC, RG 12, vol. 1101, file 11-40-22, pt. 1, J.S. Thomson to Brand, 22 May 1944. The Canadian Merchant Seamen's Order allowed authorities to remove a sailor in a Canadian port who had done anything, or even was thought likely to do something in future, to delay a vessel. Sailors could be sentenced to up to nine months of hard labour by a three-man tribunal with no right to appeal. Shortly

after the *Kildonan Park* incident, the Canadian government introduced the Merchant Seamen's Foreign Jurisdiction Order, which allowed captains to prosecute Canadian sailors for behaviour in foreign ports upon a vessel's return to Canada.

60. Firemen were responsible for shovelling coal into and attending the boiler fires.

61. NAC, RG 12, B-14-C, 1987-88/133, box 93, file 963, *Algonquin Park*, log for 1 February 1942-16 December 1943 voyage.

62. *Regulations and Instructions for the Royal Canadian Navy, 1942* (Ottawa, 1942), 97.

63. *Searchlight*, July and November 1944.

64. RCN regulations also ignored the knowledge that VD could only be spread through sexual contact. The Navy's standing regulations stated: "A steward, cook or person employed as butcher, who contracts or is suffering from venereal disease, is to be relieved of all duties peculiar to his rating while any degree of infectivity remains." See *Regulations and Instructions, 1942*, 106.

65. NAC, RG 24, D-1, vol. 6853, file NSS 8750-4025, Naval Boarding Service Report, 23 May 1945.

66. ILO, *Protection*, 40.

67. Naval Boarding Service Report, 27 August 1942.