

blood, we immediately branded him for the grave. He had consumption: he had to die.”<sup>383</sup> Simon Baker’s brother Jim died from spinal meningitis at the Lytton, British Columbia, school. “I used to hear him crying at night. I asked the principal to take him to the hospital. He didn’t. After about two weeks, my brother was in so much pain, he was going out of his mind. I pleaded with the principal for days to take him to a doctor.”<sup>384</sup>

Ray Silver said that he always blamed the Alberni school for the death of his brother Dalton. “He was a little guy, laying in the bed in the infirmary, dying, and I didn’t know ‘til he died. You know that’s, that was the end of my education.”<sup>385</sup> The death of a child often prompted parents to withdraw the rest of their children from a school. One former student said her father came to the school when her sister became ill at the Anglican school at Aklavik, Northwest Territories. “He came upstairs and there we were. He cried over us. He took me home. He put her in a hospital, and she died.”<sup>386</sup>

The high death rates in the schools were, in part, a reflection of the high death rates among the Aboriginal community in general. Indian Affairs officials often tried to portray these rates as simply the price that Aboriginal people had to pay as part of the process of becoming civilized. In reality, these rates were the price they paid for being colonized.<sup>387</sup> Aboriginal livelihoods were based on access to the land; colonization disrupted that access and introduced new illnesses to North America. Colonial policies helped wipe out food sources and confined Aboriginal people to poorly located reserves, with inadequate sanitation and shelter. The schools could have served as institutions to help counter these problems. To do that, however, they would have had to have been properly constructed, maintained, staffed, and supplied. Government officials were aware of this. They were also aware that death rates among students at residential schools were disproportionately high. It would be wrong to say the government did nothing about this crisis: the 1910 contract did provide a substantial funding increase to the schools. But the federal government never made the type of sustained investment in Aboriginal health, in either the communities or the schools, that could have addressed this crisis—which continues to the present. The non-Aboriginal tuberculosis death rate declined before the introduction of life-saving drugs. It was brought down by improvements in diet, housing, sanitation, and medical attention. Had such measures been taken by the federal government earlier, they would have reduced both the Aboriginal death rates and the residential school students’ death rates. By failing to take adequate measures that had been recommended to it, the federal government blighted the health of generations of Aboriginal people.

## Burial policy

Many of the early schools were part of larger church mission centres that might include a church, a dwelling for the missionaries, a farm, a sawmill, and a cemetery. The mission cemetery might serve as a place of burial for students who died at school, members of