Celebrating 125 Years – The Journey Continues

by Sister Judine Mayerle, OSB (jmayerle@css.edu)

“Before and above all things, care must be taken of the sick, that they be served in very truth as Christ is served.”

Rule of St. Benedict, Chapter 36

Throughout the history of the Duluth Benedictines, Sisters have ministered to the sick in a variety of ways and in a variety of places, following St. Benedict’s Rule, which continues with the words of Christ in Scripture, “I was sick and you visited me” (Matthew 25:36), and “What you did for one of these least of my people, you did for me” (Matthew 25:40). The following examples highlight the Sisters, laypeople, and clergy who were committed to Christ’s teachings.

The beginning of health care: St. Mary’s, Duluth

The Duluth Benedictines established their first hospital in Duluth in 1888 on a “campus” that had been built by Abbot Alexius Edelbrock of St John’s Abbey in (what today is) Collegeville, Minnesota. He thought an abbey of monks in Duluth could create a strong Benedictine presence in the city, and he had purchased a block of land in West Duluth and planned to build a church, an elementary school, and a seminary, which he envisioned as the new abbey. Construction neared completion by the end of 1887, but the plans for the new foundation didn’t materialize. One of the reasons was that the Abbot realized the abbey could not compete financially against the growing city’s new public schools.

Significant time and money had been invested in constructing the buildings on what had become known as the St. Clement’s campus, and the Abbot suggested that Mother Scholastica of St. Joseph, Minnesota, take over the brick four-story seminary building and turn it into a hospital. Sisters from St. Benedict’s Convent in St. Joseph were already operating two hospitals established by Abbot Alexius in St. Cloud, Minnesota, and Bismarck, North Dakota, and the only hospital in Duluth was St. Luke’s, which had been opened in 1882 by an Episcopal minister in response to a typhoid epidemic rampant in the city. Discovery of iron ore on the Mesabi and Vermillion Ranges and the expansion of the timber industry attracted new residents to the city and throughout northeastern Minnesota. By 1887, when another typhoid epidemic erupted, it was clear that another hospital was needed.

With some financial assistance from her parents, Peter and Anna Kerst, Mother Scholastica took on the monthly rent of $100 and the remodeling needed for what was named St. Mary’s Hospital which, from its beginning in 1888, has been the flagship hospital of the Duluth Benedictines. Sister Alexia Kerst, who was trained at St. Alexius Hospital in Bismarck, and six other Sisters from St. Benedict’s Convent were the first staff of the new hospital.
The prevalence of contagious diseases along with the dangerous occupations of logging, shipping, and mining quickly filled much of the new hospital with patients. The catastrophic Hinckley fire of 1894, followed by two more typhoid epidemics, stretched the hospital to its capacity, and by 1896 it was clear that a larger hospital was needed. The Sisters had established an independent Benedictine foundation in Duluth in 1892 and planned to build a motherhouse and a school for young women at Fifth Avenue West and Third Street. However, they were persuaded by city officials, members of the clergy, and the hospital medical staff to instead build a larger hospital on the site. In 1898 the “new” St. Mary’s Hospital, which could house 200 patients, twice as many as the first hospital, was completed.

As the city grew, St. Mary’s Hospital did as well, expanding numerous times over the years. Nurses’ training involved Sisters attending lectures given by staff doctors to supplement their on-site learning. A few Sisters studied at St. Joseph’s Training School for Nurses in Milwaukee. In 1908, Mother Scholastica made an extensive trip to visit many hospitals in the East and South to acquaint herself “in the best and most modern methods employed in the conduct of Training Schools.” As a result of her observations and the experience of Sisters who had attended nurses’ training schools, a plan was developed and approved by Bishop James McGolrick. The St. Mary’s Hospital Training School for Nurses graduated its first class in 1912. St. Mary’s Hospital continued to expand its comprehensive health care over the decades that followed, with additions to and replacement of the 1898 structure and new wings to house more patients and specialized services.

**Early Health Insurance**

During the early years, the hospitals founded by the Benedictine Sisters had two main sources of income: fees from patients and from what came to be known as the “lumberjack” ticket, which offered affordable health insurance in the form of a “ticket” to men working in lumber (and then mining) camps at whatever Benedictine hospital was nearest their work site. Stories are told about Sister Amata Mackett, considered the “chief saleswoman” for the program, who visited the lumberjack camps and later the mining camps across northeastern Minnesota to sell the tickets, at the same time dispensing advice, darning socks, and baking pies in the camp cookhouse. According to archival records, she was six feet tall, weighed over 200 pounds, and was known to the men as “Sister Lumberjack.” She went into the camps by whatever conveyance was available: steam locomotive, railroad handcar, a wagon pulled by an ox team, or on snowshoes.

When legislation was passed in 1913 mandating a system of workmen’s compensation in Minnesota, the hospital ticket program ended. However, it had served its purpose in helping keep the hospitals financially solvent during the early years and affording guaranteed health care to the hundreds of miners and loggers in the Northland.
Expansion of Health Care Ministry

St. Anthony’s Hospital – Bemidji
When the Benedictines established their new foundation in Duluth in 1892, they launched a health-care ministry that built hospitals across northern Minnesota. One hospital was in Bemidji, a very small settlement without railways or roads, just trails through the woods that led to lumber camps and other similar small settlements. When the Benedictines came to start a hospital in 1898, Bemidji had been in existence for only two years and consisted of one store, a post office, and six homes. The Sisters leased the second floor of the store and equipped it for temporary use as a hospital. St. Anthony’s Hospital had room for 24 patients and was commonly known as “Lumberjack Hospital.” The small hospital quickly ran out of room, and in 1899 the Sisters bought a parcel of land to build the first hospital building. A new wing was added in 1900 and another addition in 1910. St. Anthony’s closed in 1922 when the Sisters were needed in Crookston, Minnesota, to help staff the hospital there.

St. Joseph’s Hospital – Brainerd
Dr. James Camp, a physician and surgeon serving logging camps of the area, first opened a 15-bed hospital in the settlement of Brainerd in 1890, and two years later purchased a site on the east bank of the Mississippi River to build a larger facility. Seven years later he asked the Duluth Benedictines if they could come to Brainerd and manage the Camp Hospital. The Sisters purchased it from Dr. Camp in 1902 and renamed it St. Joseph’s Hospital, and a year later began construction of a new 35-bed facility. The hospital was remodeled and enlarged as the population in the Brainerd area grew. In 1953 the Sisters built a new 140-bed hospital, and ensuing years saw continued expansion of the facility to encompass the additional services offered by the modern hospital that exists today.

St. Vincent Hospital – Crookston
The people of Crookston had repeatedly asked the Benedictines to help them build and staff a hospital, but it would necessitate further borrowing by the Sisters. They chose instead to rent a building in 1900 that could serve as a temporary hospital. It soon became apparent that a larger facility was needed, and in 1902 they opened a 60-bed hospital that the Crookston Daily Times called “a blessing to the city!” Although both St. Joseph’s Hospital in Brainerd and St. Vincent’s Hospital were successful, the Crookston hospital did not do as well financially, possibly because its location in a quiet farming area at some distance from the logging camps rarely saw it filled to capacity. When Mount Saint Benedict, formerly a daughterhouse of the St. Scholastica Motherhouse in Duluth, was established as an independent foundation in Crookston in 1919, the Duluth Benedictines who had built and staffed St. Vincent’s hospital turned it over to them.
St. Benedict’s Hospital - Grand Rapids

Grand Rapids was founded on the banks of the Mississippi River because of the extensive logging done in the area, especially the highly prized white pine. The first physician in what is now Itasca County was employed to look after the health of the men constructing dams to control the water levels of Pekegama, Winnibigosh, and Leech Lakes. The first hospital was built by the Northwestern Benefit Association, a for-profit group supported primarily by those who worked in the forests or on the railroads. Some pioneer doctors formed partnerships and built small hospitals, one of which was purchased by the Duluth Benedictines in 1898. A newspaper clipping of the time tells how “Four sisters of the Order of St. Benedict arrived here a week ago last evening to take charge of the Ehle & Russell hospital,” which they renamed St. Benedict’s Hospital. The article goes on to say that men carrying the Sisters’ insurance ticket may have any doctor in the city to treat them, “and it is hoped that this hospital will in due time be worthy of its parent institution, St. Mary’s in Duluth.”

St. Benedict’s Hospital was a poorly constructed frame structure where “winter winds were cold and stoves roared during the freezing nights.” A booklet about the hospital, entitled “The Story of a Hospital on the Timbered Frontier,” tells how the first Sisters who came “remained for some years, and the community knew them well...they wore the sober garments of their order. They were skilled and sympathetic...gentle but strong and firm.” The Sisters remained until 1912 and then gave up their work in Grand Rapids because there were fewer lumberjacks, and older hospitals were becoming obsolete. During the fourteen years in which the Sisters operated the hospital in Grand Rapids, health care was given to a total of 12,478 patients.

Hibbing General Hospital - Hibbing

Hibbing, Minnesota, is home to the largest iron ore mine in the world, the Hull Rust Mahoning, discovered by Leonidas Merritt in 1893. It supplied as much as one-fourth of all the iron ore mined in the United States during its peak production during World War I and World War II. In 1915 when the population of Hibbing was 20,000, it was determined that some of the ore went under the town. Negotiations between the Oliver Mining Company and the village resulted in a plan whereby the entire village would relocate to a site two miles south. In 1920, as part of the financial arrangement resulting from the village’s relocation, the Oliver Mining Company built the new 35-bed Rood Hospital, named after Dr. Dana Rood who had come to Hibbing in 1893 and established a small hospital. This building served as a combined hospital and clinic.

When the need for a larger, more modern hospital became apparent, the Hibbing district mining companies helped remodel the Rood Hospital and add an additional wing. Known for their work in health care, the Duluth Benedictines were asked to equip and run the hospital. In return, the deed to the 130-bed hospital, to be known as Hibbing General Hospital, was given to the Sisters in 1942.
In 1953 it became apparent that Hibbing General Hospital was very overcrowded. A fund-raising campaign proposed to raise $1,250,000, and of this amount the local mining companies pledged $750,000. The Duluth Register noted in October 1956, “Through the sacrifice of the Duluth Benedictine Community and the generosity of the mining companies, the citizens, and the Ford Foundation, Hibbing General Hospital is now prepared to meet the needs of the people of the area.” This 1958 expansion resulted in a 230-bed, 20-bassinet hospital with additional specialty departments. A decade later, when a new regional hospital for the Hibbing and Chisholm areas was being planned, the Duluth Benedictines supported the idea but were unable to finance its construction and operation. The Community had begun planning to build a Benedictine Health Center connected to its monastery buildings in Duluth and could not handle another large financial commitment. The Center was needed to house infirm Sisters as well as Duluth residents and individuals with special needs.

According to archival legal documents, the ultimate goal of “a fair and equitable settlement for the transfer of Hibbing General Hospital from the Benedictine Sisters to the people of Hibbing and the surrounding area” was accomplished in 1977, and the Sisters left Hibbing after 35 years of health care to the region.

The Journey Continues

Throughout their history, the Duluth Benedictines have demonstrated a commitment to own and/ or operate hospitals wherever there was a need. Although archival records are sketchy, and in some instances information about the small hospitals virtually nonexistent, their names are part of our history: Miners’ Hospital in Crosby (1946-1964), St. Michael’s Hospital in Cass Lake (1904-1906), St. Joseph’s Hospital in East Grand Forks (1895-1896), and St. James Hospital in International Falls (1912-1913).

The Duluth Benedictines’ commitment to health care has continued into the 21st century, when even more difficult decisions have had to be made. But with the guidance of the Holy Spirit and the support of dedicated laypeople willing to take on positions of leadership in some of their ministries, the Sisters look to the challenges of the future as a continuation of what God asks of all of us in serving each other in His name.

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Rule of St. Benedict, Chapter 3