

Sacred Daemons:
The Perception And Treatment Of Intellectually Disabled
Children In British Columbia, 1870-1930

By

Nicholas James Clarke

B.A., University of Canterbury, 1996
B.A. (Honours), University of Canterbury, 1998

A THESIS SUBMITTED IN PARTIAL FULFILMENT OF THE
REQUIREMENTS FOR THE DEGREE OF

MASTER OF ARTS

IN

THE FACULTY OF GRADUATE STUDIES

(Department of History)

We accept this thesis as conforming to the required standard

Dr. Robert McDonald
Supervisor

Dr. Leslie Paris

THE UNIVERSITY OF BRITISH COLUMBIA

May 2004

©Nicholas James Clarke, 2004

Library Authorization

In presenting this thesis in partial fulfillment of the requirements for an advanced degree at the University of British Columbia, I agree that the Library shall make it freely available for reference and study. I further agree that permission for extensive copying of this thesis for scholarly purposes may be granted by the head of my department or by his or her representatives. It is understood that copying or publication of this thesis for financial gain shall not be allowed without my written permission.

Nicholas James Clarke

30/4/2004

Name of Author (*please print*)

Date (dd/mm/yyyy)

Title of Thesis: Sacred Daemons:

The Preception and Treatment of Intellectually Disabled Children In British
Columbia, 1870-1930

Degree: Master of Arts

Year: 2004

Department of History

The University of British Columbia
Vancouver, BC Canada

Abstract

By examining the treatment of intellectually disabled children in British Columbia between 1870 and 1930, this paper suggests that the commonly held historiographical assumption that western children experienced “dramatic change in economic and sentimental valuation” during the late nineteenth and early twentieth centuries requires some careful qualification. For while many parents undoubtedly invested their intellectually disabled children with the sentimental value that society increasingly projected onto ‘normal’ children, the same cannot be said of the majority of medical and educational professionals. Indeed, rather than “sacralize” children with intellectual disabilities, government officials and medical and educational professionals ‘daemonised’ them.

Table of Contents

Abstract.....	ii
Table of Contents.....	iii
Acknowledgements.....	iv
<i>Sacred Daemons</i>	1
Bibliography.....	42

Acknowledgement

Writing this thesis has left me in intellectual and emotional debt to many people. While I will never be able to completely repay these debts, I hope these few words will demonstrate the sincere respect and gratitude I have for all those who supported me.

To start I would like to thank my supervisor, Dr. Robert A. J. McDonald for his unwavering support and guidance. His insightful comments and repeated proofreading have made this thesis a much better product than it otherwise would have been. I would also like to thank Dr. Veronica Strong-Boag for all encouragement she gave me, especially in the earlier stages of my research. My greatest debts are owed to my family. To my parents, Robert and Judy Clarke, for all the sacrifices they have made for me over the years. Their often-unrecognised advocacy work for people with disabilities has been, and remains, a source of pride and inspiration for me. To my brother and sister, Timothy and Jane Clarke, for keeping me grounded in the “real world” when I threatened to float away. Finally, to my wife, Marcia George, who believed I could write this even when I thought I could not. It is no exaggeration to say that without her love and support this paper would have never been written.

During the last fifteen years western society's evolving constructions of intellectual disability, and of the treatment and perceptions of individuals defined as intellectually disabled, has become a "growth area" in historical research. A large number of academic studies from various countries has greatly increased historical understanding of both the medical and the social evolution of the concept of intellectual disability, and of western society's reaction to it.¹ However, while these works have done much to extend our knowledge of the pioneers of disability research and special education, and of the institutions built for the care and incarceration of the intellectually disabled, they have largely failed to examine the experiences of the intellectually disabled as a group. Indeed, it is reasonable to say that much of the limited history that has been published about individuals with intellectual disability has been not so much their story as that of others acting for or against them.² Moreover, several scholars have argued that historians' traditional focus on the rise of the asylum has not only disregarded the continuance of community support for the intellectually disabled, but also created a false

¹ The following, far from exhaustive, list provides an overview of current scholarship in the field. Herbert Covey, *Social Representations of People with Disabilities* (Springfield: Charles C. Thomas, 1998); Mark Jackson, "Images of Deviance: Visual Representations of Mental Defectives in Twentieth Century Medical Texts," *British Journal for the History of Science*, 28, 1995, pp. 319-37. Mathew Thomson, *The Problem of Mental Deficiency: Eugenics, Democracy, and Social Policy in Britain c.1870-1959* (Oxford: Clarendon Press, 1998). For historiographical and theoretical studies, see Janice A. Brockley, "History of Mental Retardation: An Essay Review" *History of Psychology*, 2, 1, 1999, pp. 25-36; John Bullen, "Orphans, Idiots, Lunatics, and Historians: Recent Approaches to the History of Child Welfare in Canada", *Historie Sociale/Social History*, 35, 1985, pp.133-145; B.J. Gleeson, "Disability Studies: a historical materialist view," *Disability & Society*, 12, 2, 1997, pp.179-202; Catherine J. Kudlick, "Disability History: Why we need another 'Other'" *American Historical Review*, June 2003, pp.763-793; Tanya Titchkosky, "Disability Studies: The Old and the New," *Canadian Journal of Sociology*, 25, 2000, pp. 197-224; and Jan Walmsley, "Normalisation, Emancipatory Research and Inclusive Research in Learning Disability" *Disability & Society*, 16, 2, 2001, pp.187-205.

² Joanna Ryan, *The Politics of Mental Handicap* (Harmondsworth: Free Association Books, 1980), p. 85. There are some notable exceptions, especially in the United Kingdom. The Social History of Learning Disability Research Group, based in England's Open University's School of Health and Social Welfare, has not only published a number of works that focus on the lives of individuals with intellectual disabilities, but also includes disabled researchers in its research teams. Equally, the University of Sheffield-based journal *Disability & Society* frequently publishes works by authors with both intellectual and physical disabilities. For examples of the Social History of Learning Disability Research Group's work, see Dorothy Atkinson, Mark Jackson and Jan Walmsley, ed., *Forgotten Lives: Exploring the History of Learning Disability* (Kidderminster: BILD Publications, 1997) and Lindsay Brigham, Dorothy Atkinson, Mark Jackson, Sheena Rolph and Jan Walmsley, ed., *Crossing Boundaries: Change and Continuity in the History of Learning Disability* (Kidderminster: BILD Publications, 2000). The Social History of Learning Disability Research Group's home page can be viewed at www.open.ac.uk/shsw/Research/rphistlearndis20.html.

“rupture” between the ways that pre-industrial and industrial communities treated the mentally ill and the intellectually disabled.³ Indeed, as the American special education theorist Philip Ferguson has noted that even when historians have examined the experiences of people with intellectual disabilities, a disproportionate amount of time and effort has been spent researching the lives of the minority who resided within asylums. This practice has left the academy desperately short of information about the lives of the majority who remained outside of institutions.⁴ Thus, in an age when social historians have sought to “leave nothing out in their remaking of our map of the past,”⁵ the experiences of people with intellectual disabilities are especially conspicuous because of the limited extent to which they have been explored.⁶

This problem of exclusion is further compounded in the case of the history of children with intellectual disabilities because their dual minority status has rendered them doubly vulnerable to invisibility. This study addresses the gap in current historical knowledge by examining the value

³ Peter Bartlett and David Wright, “Community care and its antecedents,” in Peter Bartlett and David Wright, ed., *Outside the Walls of the Asylum: The History of Care in the Community, 1750-2000* (London: Athlone Press, 1999), pp. 1-18. Also see Akihito Suzuki “The Household and the Care of Lunatics in Eighteenth-Century London,” in Peregrine Horden and Richard Smith, ed., *The Locus of Care: Families, communities, institutions and the provision of welfare since antiquity* (London: Routledge, 1998), pp. 153-175; Mathew Thomson, “Community Care and the Control of Mental Defectives in Inter-War Britain,” in Peregrine Horden and Richard Smith, ed., *The Locus of Care: Families, communities, institutions and the provision of welfare since antiquity* (London: Routledge, 1998), pp. 198-218; and D. Wright, “Familial Care of ‘Idiot’ Children in Victorian England,” in Peregrine Horden and Richard Smith, ed., *The Locus of Care: Families, communities, institutions and the provision of welfare since antiquity* (London: Routledge, 1998), pp. 176-197.

⁴ Ferguson argues that even at the height of the eugenics era in the United States “...less than 10 percent of the identified population of mentally retarded people was actually confined in large, public institutions.” He acknowledges that his population calculations are open to criticism on a number of different levels but argues that his general point – that the height of the asylum era the large majority of intellectually disabled individuals did not reside in institutions is a valid one. I am inclined to agree with Ferguson, as there is considerable independent evidence to support his contention. See, for example, Philip Reilly, *The Surgical Solution: A History of Involuntary Sterilization in the United States* (Baltimore: John Hopkins University Press, 1991), p. 13; Bartlett and Wright, ed., *Outside the Walls of the Asylum*. Philip Ferguson, *Abandoned to their Fate: Social Policy and Practice Toward Severely Retarded People in America, 1820-1920* (Philadelphia: Temple University Press, 1994), p. 167; Jessie Taft, “Supervision of the Feeble-minded in the Community,” *Canadian Journal of Mental Hygiene*, Vol. 1, 2, 1919, pp. 164-171; and Ferguson, correspondence with the author.

⁵ Peter Stearns, “The New Social History: An Overview,” in James Gardner and George Adams, ed., *Ordinary People and Everyday Life: Perspectives on the New Social History* (Nashville, American Association for State and Local History, 1983), p. 7.

⁶ Indeed, Karen Hirsh, in reference to Stearns’ statement, has noted “few historians have included disability issues as an integral part of their thinking and writing.” See K. Hirsh, “Culture and Disability: The Role of Oral History,” *Oral History Review*, 22, 1, 1995, p. 1 and Paul K. Longmore and Lauri Umansky, “Disability History: From the Margins to the Mainstream,” in Paul K. Longmore & Lauri Umansky, ed., *The New Disability History: American Perspectives* (New York: New York University Press, 2001), pp. 1-32.

that early British Columbian society afforded to children with intellectual disabilities and how this valuation influenced the children's lives. It will argue that the formulas used by British Columbian medical and educational professionals to 'judge' and 'value' intellectually disabled children were quite different from those used for 'normal' children.⁷ In doing so it will demonstrate four things. First, while 'normal' children may have increasingly become venerated by the state during the late nineteenth and earlier twentieth centuries, intellectually disabled children did not, for the most part, enjoy the same experience.⁸ Two, there was considerable disparity between the way in which the British Columbian government and the parents of intellectually disabled children viewed and valued these children. Indeed, while many medical and educational professionals increasingly attempted to dehumanise intellectually disabled children by portraying them as threats to society, many parents projected on their disabled children the same emotional value the state was increasingly projecting on 'normal' children. Three, a number of intellectually disabled individuals had real agency over their lives and usefully contributed to the communities in which they lived. Four, a true understanding of the position intellectually disabled individuals held in British Columbian society between 1870's and 1930 can only be found by examining these individuals' lives outside the walls of the institutions built to house them. This is not only because, as noted above, institutions only housed a small minority of a country's intellectually disabled population, but also because the lives that individuals led inside asylums seldom reflected the positions they held in their communities prior to institutionalisation.

In conducting my research I have referred to a diverse range of primary sources including newspaper articles, government reports, medical journals, monographs, and asylum records. By

⁷ I use "normal" here to designate an individual who is seen to rest within the constructed "norms" (physical, psychological, and sociological) of the society in which he or she lives. It is not intended as a value judgement.

⁸ See, for example, Hugh Cunningham *Children and Childhood in Western Society Since 1500* (Harrow: Longman, 1995), pp.134-185. Also see page 6 below.

using these sources this study might seem to follow the traditional focus of historians on institutions and the views of the medical/educational professionals rather than the experiences of people with disabilities. Such observations are only partially correct. As well as recording pertinent medical information, asylum records frequently also include a plethora of information about their subjects' pre-institutional history, the records of doctors' interviews with both the subject and his or her family, and correspondence between parties interested in the inmate's welfare. Indeed, as Mary-Ellen Kelm has demonstrated, admission records and patient's casebooks can allow the researcher to "walk out the gates" of an asylum and discover the lives that intellectually disabled individuals led before they were institutionalised.⁹ In other words, many sources that in the past seem to have disenfranchised and silenced intellectually disabled children can be used to reconstruct, albeit obliquely, the experiences of these individuals. In doing so historians can give these children a presence at the centre, rather than on the periphery, of the historical record.

However, giving a previously silenced group their place in the academic "sun" is not the only justification for, or aim of, this study. Disability, whether intellectual or physical, is as much a social construct as it is a pathological condition. The terminologies that a society uses to describe and categorise 'disability', and the way it perceives individuals labelled as "disabled", vary widely depending on historical, cultural and geographic context.¹⁰ Therefore, interest in

⁹ Mary-Ellen Kelm, "'The only place likely to do her any good': The Admission of Women to British Columbia's Provincial Hospital for the Insane," *BC Studies*, 96, Winter 1992-1993, pp.66-89. Also see Megan Davis, "The Patients' World: British Columbia's Mental Health Facilities, 1910-1935," (Master of Arts Thesis: University of Waterloo, 1989).

¹⁰ T. Bedirhan Üstün, ed., *Disability and Culture: Universalism and Diversity* (Seattle: Hogrefe & Huber, 2001). Also see Jill Bevan-Brown, "Intellectual Disability: A Maori Perspective," in Keith Ballard, ed., *Disability, Family, Whanau and Society* (Palmerston North: Dunmore Press, 1994), pp. 205-230; Anne Digby, "Context and Perspective," in David. Wright and Anne Digby, ed., *From Idiocy to Mental Deficiency: Historical perspectives on people with learning disabilities* (London: Routledge, 1997), pp. 1-21; Sandra Lane, Blanche I. Mikhail, Alice Reizian, Paul Courtright, Rani Marx, and Chandler R. Dawson, "Sociocultural Aspects of Blindness in an Egyptian Delta Hamlet: Visual Impairment vs. Visual Disability," *Medical Anthropology*, 15, 3, 1993, pp.245-260; Longmore and Umansky "Disability History", p.4; Semour Sarason & John Doris, *Educational Handicap, Public Policy, and Social History: A Broadened Perspective on Mental Retardation* (New York: Free Press, 1979), pp. 13-

disability as a subject of historical inquiry opens new ways to critically re-examine and reinterpret changing discourses on health, normalcy, religion, modernity and power.¹¹ With this in mind the following study aims to continue the current process of adding people with disabilities to the historical record while presenting another lens through which to examine British Columbia.

Although this study focuses on British Columbia, the social phenomena explored here were familiar in most western countries in the late nineteenth and early twentieth centuries. This is not to say that policies towards the intellectually disabled children did not vary between different western countries, and, indeed, between the provinces and states within countries, because they most certainly did, but rather that the major concerns about, and constructions of, intellectual disability were broadly similar.¹² This was because during the period the ‘problem’ and treatment of neglected, delinquent and ‘feebleminded’ children generated considerable ideological cross-fertilization between western countries.¹³ Therefore, while this study offers a new approach to

15, 24-39; Margaret Tennant, “Disability in New Zealand: An Historical Survey” *New Zealand Journal of Disability Studies*, 2, 1996, pp. 3-33; and E. Peter Volpe, “Is Down Syndrome a Modern Disease?” *Perspectives in Biology and Medicine*, Vol. 29, 3, 1986, pp.423-436. I am also grateful to Keith T. Carlson of the University of Saskatchewan for his enlightening comments regarding concepts of disability amongst the Coast Salish people of British Columbia.

¹¹ A prime example of this can be found in Douglas C. Bayton’s groundbreaking essay “Disability and the Justification of Inequality in American History.” In this study Bayton compellingly argues that disability discourse offers historians a useful tool to examine ways in which sexual and race inequalities have been justified in American history. See Douglas C. Bayton, “Disability and the Justification of Inequality in American History,” in Paul K. Longmore and Lauri Umansky, ed., *The New Disability History: American Perspectives* (New York: New York University Press), pp. 33-57. Also see Hirsh, “Culture and Disability” p.2 and Kudlick, “Disability History.”

¹² For example, while numerous states in the United States of America, as well as the Canadian provinces of Alberta and British Columbia, passed acts allowing for the sterilization of “mentally defective” individuals, the governments of New Zealand and the United Kingdom rejected such measures. Also see note 107 below.

¹³ For example, in writing a report recommending amendments to New South Wales’ child delinquency legislation, Sir Charles MacKellar, President of the State Children’s Relief Board, investigated the treatment of neglected, delinquent and feebleminded children across Europe and North America. Charles Mackellar, *The Treatment of Neglected and Delinquent Children in Great Britain, Europe, and America with Recommendations as to Amendment of Administration and Law in New South Wales* (Sydney: W.A. Gullick Government Printer, 1913). The treatment of the ‘feebleminded’ across Europe, United States and in Australia is reviewed on pp. 66-131. In relation to Canada, see note 39 below. Further demonstrating the broad similarities between Western countries’ perceptions and treatment of intellectually disabled individuals, this study has also drawn on evidence from my own unpublished research into the treatment of intellectually disabled children in late nineteenth and early twentieth century New Zealand.

examining British Columbian society in the period 1870-1930, it also acts as a case study of events occurring throughout the western world.

Because disability is socially constructed, historians interested in examining disability must pay careful attention to the terminologies they employ when describing their research subjects. Therefore, although I have used contemporary language to describe my research subjects in this introduction, when referring to the 1870-1930 period I will use the nomenclature of that time. This nomenclature includes terms such as *mental defective*, *mental deficient*, *idiot*, *imbecile*, *feeble-minded*, and *moron*. While many of these words are considered highly offensive in contemporary western society and, in a number of cases, have become insults, they reveal the sensibilities of the people who used them, the meanings people attached to intellectual impairment, and the way in which mainstream society judged the intellectually impaired. In other words, terminology reflects the nature of the discourse surrounding intellectual impairment in the late nineteenth and early twentieth centuries. Indeed, to resort to the use of today's terminology when discussing the historical experiences of intellectually disabled children would be to assert anachronistic understandings and constructions of intellectual impairment that simply did not exist at the time, and to deny past societies their own dialogue on the subject.¹⁴



In her influential monograph *Pricing the Priceless Child: The Changing Social Value of Children*, the American sociologist Viviana Zelizer has argued that between the 1870s and the 1930s children in the United States experienced a “dramatic change in economic and sentimental value” and came to be perceived as “exclusively emotional and affective assets” rather than “objects of utility”.¹⁵ Children became economically “worthless” but emotionally

¹⁴ James Trent, *Inventing the Feeble Mind: A History of Mental Retardation in the United States* (Berkeley: University of California Press), 1994, p.5.

¹⁵ Viviana Zelizer, *Pricing the Priceless Child: The Changing Social Value of Children* (Princeton: Princeton University Press), 1994, p.11.

“priceless” figures infused with strong “sentimental or religious meaning.”¹⁶ They were, to use Zelizer’s terminology, ‘sacralized’.¹⁷ Although Zelizer’s work is based primarily on the study of changes in social ideology about the value of children within the United States of America, its general conclusions are of relevance to all countries whose dominant cultures are of western European ancestry. This is because her work traces social, economic, and demographic changes within the United States such as the advent of child-saving movements, the rise of compulsory education, and the declining birth rates of western countries in the industrial era.¹⁸ Zelizer’s study does, however, have one important limitation that must be recognised: she focuses only on the ‘normal’ child. Nowhere in her study does she examine mentally deficient children.¹⁹

This “blind spot” does not detract from Zelizer’s thesis, as her work primarily traces the rise and spread of the dominant social view of the child within modern western countries. Indeed, one feels that if she had attempted to cover all possible areas of experience her work would have become a tangled Gordian knot of exceptions rather than a well-documented study of a very important change in western society’s conceptualisation of the child and childhood. However, this “blind spot” does force one to question whether the rise in the social valuation of the child from 1870 to 1930 also included mentally deficient children. The answer is at once both yes and no.

¹⁶ Zelizer, *Pricing the Priceless Child*, p.11.

¹⁷ Zelizer, *Pricing the Priceless Child*, p.11.

¹⁸ See, for example, Roger Cooter, ed., *In the Name of the Child: Health and Welfare 1880-1940* (London: Routledge, 1992). For works relating to Canada, see Cynthia Comacchio, *Nations are Built of Babies: Saving Ontario’s Mothers and Children 1900-1940* (Montreal: McGill-Queen’s University Press, 1993) and Neil Sutherland, *Children in English-Canadian Society: Framing the Twentieth Century Consensus* (Waterloo: Wilfrid Laurier University Press, 2000).

¹⁹ Nor does she give more than a cursory glance to the experiences of children of visible ethnic minorities. Given the increasing amount of literature which has demonstrated that the children from ethnic minorities often had quite different experiences of childhood than children from the dominate group, this oversight is problematic. In relation to Canada, for example, see Mona Gleason, “Race, Class, and Health: School Medical Inspection and ‘Healthy’ Children in British Columbia, 1890-1930,” *Canadian Bulletin of Medical History*, 19, 2002, pp. 95-112 and James Miller, *Shingwauk’s Vision: A History of Native Residential Schools* (Toronto: University of Toronto Press, 1996). Also see Susan Lederer, “Orphans as Guinea Pigs: American Children and Medical Experiments, 1890-1930,” in Roger Cooter, ed., *In the Name of the Child: Health and Welfare 1880-1940* (London: Routledge, 1992), pp.96-123.

In the October 1919 issue of the *Canadian Journal of Mental Hygiene*, Dr. Helen MacMurchy, a leading figure in Canada's child saving movement, published a short article entitled "The Parents' Plea."²⁰ In this article MacMurchy stated that it was sadder for parents to "bear, to rear and find that the son or daughter of many hopes and prayers will never grow up, but is, and always will be mentally deficient... than to lose a child."²¹ With these words MacMurchy identified how many Canadian (and indeed, many western) medical and educational professionals differentiated between "mentally deficient" children and "normal" children. Rather than a bundle of joy offering proud parents the promise of a bright and happy future, a mentally deficient child presented the prospect of suffering, pain and angst on a level so immense that it exceeded the grief parents experienced with the death of a 'normal' child. Indeed, in many cases the death of a mentally deficient child was seen by medical professionals as a loss that one should rejoice about rather than lament. As Dr. G. H. Manchester, the Acting Medical Superintendent of British Columbia's Provincial Hospital for the Insane (P.H.I),²² stated in a letter to Albert Green²³ on the death of Green's daughter Marigold in 1901:

[Marigold] passed away at 7pm...and I made an examination of the brain. It showed that the left half of the brain was very deficient, in fact almost wanting entirely and its place taken by water which filled out the membranes like a sack. With such a brain as this it is not hard to understand the fact of her being as she was a cripple physically and mentally...It is well that it is all over with her as she was a very great care and would never have had the slightest chance to be anything but an idiot."²⁴

²⁰ On MacMurchy's involvement in the Canadian child saving movement, see Comacchio, *Nations are Built of Babies*, pp.70-79, 95-96 and Sutherland, pp.62-63, 229-230.

²¹ H. MacMurchy, "The Parents Plea", *Canadian Journal of Mental Hygiene*, 1, 3, 1919, p.211.

²² Dr. G.H. Manchester was appointed assistant medical superintendent of P.H.I on March 1 1899. He had previously worked with mentally ill patients at Verdun Protestant Hospital in Montreal and became medical superintendent in 1901 on the resignation of the then superintendent Dr. George Fowler Bodington. Dr. Bodington, who was 73 at time of his resignation, had been medical superintendent since 1895. See Val Adolph, *In the Context of Its Time: A History of Woodlands* (Victoria: Ministry of Social Services, Government of British Columbia, 1996), pp.54-55, 57, 64-65.

²³ In the following examples, all names of patients and their families have been changed in accordance with the privacy laws of Canada and New Zealand.

²⁴ Letter from Dr. G.H. Manchester, Acting Medical Superintendent, to Mr. A. Green, December 20, 1901, British Columbia, Mental Health Services Patient Case Files 1872-1942, GR-2880, Box 9, File 1174, British Columbia Archives and Records Services. Hereafter cited as *MHS*.

Dr. Manchester's letter of commiseration to Green is interesting in particular because it indicates why Marigold's death should be seen as a 'blessed' event. It was "well that it [was] all over" not because Marigold was suffering, but because she was "a very great care [who] would never have had the slightest chance to be anything but an idiot." Dr. Manchester did not see his patient's death as fortunate because she had escaped the (very real) torments of her mortal coil, but rather because it meant that both her father and P.H.I.'s staff would no longer bear the burden of caring for an individual who would never amount to anything or fulfil a 'useful' position within society.²⁵ In other words, Marigold's death was a blessing because she was no longer an emotional and economic encumbrance to her family and the province of British Columbia.

The fact that Dr. Manchester chose in his letter of 'condolence' to avail Albert Green with the details of Marigold's autopsy results further supports this interpretation. By describing to Green the neuroanatomical deficiencies of his daughter's brain, Dr. Manchester underlined the fact that Marigold was a mental and physical 'cripple', and thereby added weight to his assertion that it was "well" that she was dead. Indeed, it seems clear that in the superintendent's mind Marigold was little more than an animal incapable of any form of human emotion or understanding. For example, when discussing the death of Marigold's mother Manchester coldly stated that Marigold would "[N]ever know the difference."²⁶ Manchester's construction of Marigold as less than human is also evidenced by the lack of respect he showed her corpse. The autopsy he conducted on Marigold's body immediately after her death, which he described in detail to her father, was less focussed on discovering the cause of her death than on allowing the medical superintendent to examine her "deficient" brain.

²⁵ As well as being intellectually disabled, Marigold was also severely physically disabled. Her admission file describes her as "physically helpless" (although it notes she was capable of feeding herself) and in at least one of his letters to Dr. Manchester Marigold's father calls her a "cripple." Mr. A. Green, November 14, 1901, Dr. G.H. Manchester, November 16, 1901, December 20, 1901. *MHS*, Box 9, File 1174.

²⁶ Letter from Dr. G.H. Manchester to Mr. Green, November 16, 1901, *MHS*, Box 9, File 1174.

Dr. MacMurchy's comments about the pain that parents suffered with the birth of a mentally deficient child and Dr. Manchester's treatment of the severely disabled Marigold demonstrate the dangers of Zelizer's omission of mentally deficient children from her study of childhood between 1870-1930. The above stories indicate that rather than becoming "exclusively emotional and affective assets," children like Marigold were viewed by health professionals as both emotional and economic burdens to their families and the societies in which they lived. Indeed, it would seem that in many circumstances the identity of mentally deficient children as 'children' was overshadowed by their classification as 'defectives'. Not only were mentally deficient children not considered "priceless," the authorities also did not see, or indeed regulate, them as children. This last statement requires some clarification because it is central to understanding the way in which mentally deficient children were perceived and treated in both late-nineteenth and early-twentieth-century British Columbia.

In her 1992 study of the Dionne Quintuplets,²⁷ Mariana Valverde argued that the girls were victims of what she calls "fractures in social regulation", a phrase she uses to describe the processes by which social issues and problems are shifted from their expected regulatory category, such as race, to another, such as gender, dependent on time, circumstance, and individual points of view.²⁸ Rather than constructing and regulating the Quints as children, Valverde argued, the Ontario provincial government defined them as an economic entity, and more specifically, a resource that was to be administered to ensure the best possible revenue returns for the province.²⁹ "Not all human beings under twelve," Valverde has since noted with reference to the Quintuplets, "are necessarily governed as children... We cannot assume from the

²⁷ Mariana Valverde, "Representing Childhood: The Multiple Fathers of the Dionne Quintuplets" in Carol Smart, ed., *Regulating Womenhood: Historical Essays on Motherhood and Sexuality* (London: Routledge, 1992), pp.119-146.

²⁸ Sonya Rose, Kathleen Canning, Anna Clark, Mariana Valverde, and Marcia Sawyer, "Gender History/Women's History: Is Feminist Scholarship Losing its Critical Edge?" *Journal of Women's History*, 5, 1, 1993, pp.123-124.

²⁹ And, one might add, political returns for the then-ruling Liberal government.

start that a government takeover of children is part of that government's family policy. The boundaries between economic policy and social policy, so clear in the apparently fixed division of responsibilities amongst ministries, [turned] out to be extremely fluid in government practice."³⁰ The ultimate result of this fluidity was that while the Quintuplets - Annette, Cecile, Yvonne, Emilie and Marie - were portrayed for an adoring public as "models of childhood", in the eyes of the authorities they were "no more 'children' ... than Mickey Mouse is a mouse."³¹

Valverde's observations about the way in which the Ontario government constructed an identity for the 'Quints' that made them something other than children applies equally well to the way the British Columbia government 'saw' mentally deficient children. For, as with the Quintuplets, within the 'bodies' of mentally deficient children the boundaries between economic policy and social policy were often blurred. However, rather than being viewed as positive economic resources, mentally deficient children were seen as 'monsters' who threatened the very survival of British Columbian society – biologically, morally and economically. Rather than enjoying 'sacralization', the majority of mentally deficient children in British Columbian society were subjected to 'daemonisation' by the British Columbian government.³²

Yet, although medical and educational professionals increasingly 'daemonised' mentally deficient children, it would be wrong to believe that they were totally dehumanised, or that all members of British Columbian society agreed with and supported the authorities' views and treatment of these children. Indeed, as will be shown below, many mentally deficient children were dearly loved by their parents and protected by their communities. What is more, in a

³⁰ Rose et al, "Gender History/Women's History", p. 124

³¹ Valverde, "Representing Childhood", p.119.

³² My use of the term "daemonisation" is meant to infer that mentally deficient children were constructed as figures that threatened and tormented the general populace. My use of this term is heavily influenced by Victor Frankenstein's use of the word "daemon" to describe his creation in *Mary Shelley's Frankenstein; Or The Modern Prometheus*, because like, the Monster, mentally deficient children's positive traits were often overshadowed by negative - socially constructed - first impressions. Mary Shelley, *Frankenstein: The Original 1818 Text*, D.L. Macdonald and Kathleen Scherf, ed. (Peterborough: Broadview Press, 2001).

number of cases individual parents and whole communities were willing to go to great lengths and expense to ensure the well being and freedom of their mentally deficient members. In other words, while medical and educational professionals attempted to ‘daemonise’ children defined as mentally deficient, many of these children’s parents and communities ‘sacralised’ them. These children became ‘sacred daemons’.



In western societies of the late nineteenth and early twentieth centuries, the mentally deficient were, in the eyes of many, a menace. Seen by medical and educational professionals as socially and economically incompetent deviants, who, if not properly controlled, threatened the economic, social, physical and moral well-being of their families and society as whole, the mentally deficient were linked not only with chronic dependency, poverty, vagrancy, prostitution, crime and a myriad of other forms of “immoral” and “antisocial” behaviours but also with the biological degeneration of the human race. Although treating economic and social incompetence as indicators of mental deficiency and linking mental deficiency with social deviancy was not new, the authorities’ focus on mental deficiency as a “threat” to society that required a response increased substantially during the nineteenth century and early twentieth centuries.³³ This was largely due to the rise of eugenics. A wide variety of studies from this

³³ Indeed, in England the legal definitions of madness and idiocy changed little between the reign of Edward II and the mid-nineteenth century. See R. Neugebauer, “Mental Handicap in Medieval and Early Modern England: Criteria, measurement and care”, in David Wright and Anne Digby, ed., *From Idiocy to Mental Deficiency: Historical perspectives on people with learning disabilities*, (London: Routledge, 1997), pp 22-43. Also note the following comments made by English solicitor Arthur Highmore in 1807:

The rational man provides for his necessities and has pleasure in this pursuit – he restrains the transient enjoyment of the superfluities, that his laudable acquisitions may become fruits of more permanent comforts; but the idiot and the manic have necessities which they know not how to provide, they have vague pursuits unaccompanied by means and undirected to an end; they can reap no fruit, for they neither planted nor pruned the branches.

Equally, in 1766 a group of bourgeoisie citizens of Halifax, Nova Scotia, complained to England’s Lords Commissioners of Trade and Plantations that the “Scum of all the Colonies [*sic*]” was flooding into the infant colony. The “scum” the concern citizens referred to were not only individuals “of the most dissolute manners... void of all Sentiments of honest Industry [*sic*],” and the “extremely indigent” but also the “Infirm, Decepreit and the

period argued that mental defectives were “throwbacks” to an older or “lesser” form of humanity, and that these conditions were hereditary and could be directly linked with anti-social behaviour and racial degeneration.³⁴ Not only did many of these studies stress the financial and social burden that mentally defective individuals and families had placed on their communities and states, they also purported to demonstrate that the mental defectives, ‘the unfit’, breed at a

insane [*sic*].” The linking of Nova Scotia’s disabled, destitute and delinquent populations together by Halifax’s bourgeoisie is indicative of the fact that these groups were seen to share shared common characteristics [Arthur Highmore, *A treatise on the law of idiocy and lunacy: to which is subjoined an appendix, containing the practice of the Court of Chancery on this subject, and some useful practical forms* (London: Butterworth, 1807) p.viii; “Halifax 24, 1766, Green to the Lords Commissioners of Trade and Plantations” quoted in Samuel D. Clark, *The Social Development of Canada: An Introductory Study with Selected Documents* (New York: AMS Press, 1942), p.126 and Marcia H. Rioux, “Bending Towards Justice,” in Len Barton, ed., *Disability, Politics and the Struggle for Change*, (London: David Fulton Publishers, 2001), p. 35].

³⁴ Some of the ‘classics’ in the field were John Langdon Heydon Down’s “Observations on an ethnic classification of idiots” (1866), Sir Francis Galton’s *Hereditary Genius* (1869), Richard Dugdale’s *The Jukes: A Study in Crime, Pauperism, Disease and Heredity* (1875), Cesare Lombroso’s *L'uomo delinquente* (The Criminal Man) (1876), Henry Goddard’s *The Kallikak Family: A Study in Hereditary of Feeble-Mindedness* (1912). John Langdon Heydon Down, “Observations on an ethnic classification of idiots”, *London Hospital Reports*, iii, 1866, pp. 259-262. By the early twentieth century Down’s ethnic degeneracy model for explaining mental defect was being questioned by a number of academics, including his son Reginald Langdon Down. See Edgar Millar “Idiocy in the nineteenth century,” in German E. Barrios & Roy Porter ed., *History of Psychiatry*, (London: Alpha Academic, 1996), pp. 367-368. For further works on the history of Down’s Syndrome see Lilian S. Zihni, *The History of the relationship between the concept and treatment of people with Down’s syndrome in Britain and America from 1866 to 1967* (Doctoral dissertation: University College London, London, 1990); Lilian S. Zihni, “Sutherland’s Syphilis Hypothesis of Down’s Syndrome,” *Journal of the History of the Neurosciences*, 4, 2, 1995, pp.133-137; and Lilian S. Zihni, “Albert Wilmarth’s Nineteenth Century Study of Down’s Syndrome in America: The Worth of a Neuropathologist, Asylum Superintendent and Eugenicist,” *Journal of the History of the Neurosciences*, 5, 2, 1996, pp.136-142. On Galton see Angus McLaren, *Our Own Master Race: Eugenics in Canada 1885-1945* (Toronto: McClelland and Stewart, 1990), p.14. Also see Francis Galton, *Hereditary Talent and Character*, in Christopher D. Green, ed., *Classics in the History of Psychology*, <http://psychclassics.asu.edu/galton/talent.htm> and Cynthia Huff, “Victorian Exhibitionism and Eugenics: The Case of Francis Galton and the 1899 Crystal Palace Dog Show,” *Victorian Review*, 28, 2, 2002, pp.1-19. On Lombroso see Stephen J. Gould *The Mismeasure of Man*, Revised Edition (New York: W.W. Norton, 1996), pp.151-177. Richard Dugdale, *The Jukes: A Study in Crime, Pauperism, Disease and Heredity* (New York: Putnam, 1875). Dugdale further developed his arguments in three articles entitled “Origin of Crime in Society” in the *Atlantic Monthly*. Dugdale, “Origin of Crime in Society”, *Atlantic Monthly*, 48, 288, Oct. 1881, pp.452-463; “Origin of Crime in Society”, *Atlantic Monthly*, 48, 290, Dec. 1881, pp.735-738; and “Origin of Crime in Society”, *Atlantic Monthly*, 49, 292, Feb. 1882, pp.243-251. For a typical response to Dugdale’s work see Anonymous, “Dugdale’s The Jukes”, *Atlantic Monthly*, 41, 245, March 1878, p.405. Also see Henry H. Goddard, *The Kallikak Family: A Study in Hereditary of Feeble-Mindedness*, in Christopher D. Green ed., *Classics in the History of Psychology*, <http://psychclassics.asu.edu/Goddard/preface.htm>. For an excellent overview of Goddard and his work, see Gould, *The Mismeasure of Man*, pp.188-204. It should be noted that while many of these academics stressed that the propensity towards antisocial behaviour was hereditary characteristic, most also recognised that sociological and environmental factors could also play their part. See, for example, Carolyn Steedman, “Bodies, Figures and Physiology: Margaret McMillan and the late nineteenth century remaking of working-class childhood”, in Roger Cooter, ed., *In the Name of the Child: Health and Welfare, 1880-1940* (London: Routledge, 1992), pp. 24-26.

much faster rate than the 'fit'.³⁵ When coupled with the fact that most western countries were experiencing a steady but noticeable decline in the birth rates of their "best" classes, the "exponential" procreation of the unfit presented for many an obvious threat: the stagnation and collapse of civilized society. Thus, if "race suicide" was to be avoided, steps had to be taken to encourage the procreation of the fit (positive eugenics) while limiting that of the unfit (negative eugenics).³⁶

In Canada, eugenics spread like wildfire.³⁷ Numerous pressure groups such as the National Council of Women of Canada, the United Farm Workers Association, the Canadian National Committee for Mental Hygiene,³⁸ as well as individual medical and educational professionals and legislators, actively involved themselves in promoting "the cause." This promotion campaign took a number of forms. One was the education of the public through the use of public lectures and the publication of pro-eugenics periodicals such as the *Canadian Journal of Mental Hygiene*³⁹ on the dangers posed to Canada by "mental defectives". Another was the lobbying of governments at the federal and provincial levels for passage of legislation designed to both

³⁵ Arthur Eastbrook, for example, in his follow-up study of the *Jukes* calculated that by 1915 the family had cost the state of New York \$2,093,685 [Arthur Eastbrook, *The Jukes in 1915* (Washington: Carnegie Institution, 1916), p. 78]. In 1919 C.M. Hincks the Associate Medical Director and Secretary of the Canadian National Committee for Mental Hygiene stated that mental defectives cost Canada \$26,000,000 a year. C.M. Hincks, "The Scope and Aims of the Mental Hygiene Movement in Canada", *Canadian Journal of Mental Hygiene*, 1,1, 1919, p. 23.

³⁶ McLaren, *Our Own Master Race*, pp. 13-27.

³⁷ For the best discussion of eugenics movement in Canada, see McLaren, *Our Own Master Race*.

³⁸ The Canadian National Committee for Mental Hygiene had been founded in 1918 by Dr. C.K. Clarke, Dean of Medicine at the University of Toronto and included a number of famous Canadian medical pioneers and eugenicists, including Dr. Helen MacMurchy, in its membership [Ian Dowbiggen, *Keeping America Sane: Psychiatry and Eugenics in the United States and Canada, 1880-1940* (Ithaca: Cornell University Press, 1997), pp.133-190].

³⁹ The *Canadian Journal of Mental Hygiene*, first published in 1919, was the mouthpiece the Canadian National Committee for Mental Hygiene. Intended for both a lay and professional readership, the journal published "non-technical" articles written by eugenicists from across Canada, the United States and Europe. It also republished 'noteworthy contributions which have added to our knowledge of mental disorders... which would otherwise not be within the reach of the general public.' The journal's the aim was simple:

... [T]o interest the general public, as well as the medical profession, in all the mental problems confronting the community, in their bearing upon the welfare of the individual and of society, and in the which is being done towards their clearer definition and more adequate solution.

See "Forward", *Canadian Journal of Mental Hygiene*, 1, 1, 1919, p.3 and Dowbiggen, *Keeping America Sane*, pp.133-190.

control and limit, through segregation and/or sterilization, the propagation of the unfit. Many eugenicists also demanded tighter immigration policies to stem the “huge flood” of defectives they believed to be entering Canada every year from other countries.⁴⁰ The growing influence of the “mental hygiene” movement is perhaps best expressed in the fact that by the 1920s mental hygienists had placed themselves and their values at the centre of the child welfare movement. Indeed, in 1920 one of Canada’s strongest proponents of mental hygiene and eugenics, the aforementioned Dr. Helen MacMurchy,⁴¹ was appointed the first chief of the Child Welfare Division of the federal Department of Health, an acknowledgment of her work in both mental hygiene and infant health.⁴²

Even before MacMurchy had taken this position, eugenics ideologies had found fertile soil in British Columbia – especially among provincial authorities. For example, Bertha Winn, head of Victoria’s special schools, stated the following in an address to the friends and members of the Women’s Canadian Club at Victoria’s Empress Hotel in 1917:

...the histories of thousands of these cases [of mental deficiency] reveal the pitiable fact that unless special provision is made for their custodianship earlier in life, they will find their respective ways into...crime, pauperism, vagrancy, prostitution, and general indecency...All defective persons are antisocial in the sense that their presence in the community means disruption, disorder and dependency. They are the running wounds of society, infecting it and weakening its vitality, placing a blight upon each succeeding generation. There is only one way to deal with this stupendous evil, and that is in checking it at its source – segregating all cases of mental defectiveness from the normal population.⁴³

⁴⁰ In relation to immigration, see the following primary and secondary sources: J. Halpenny, “One Phase of the Foreign Invasion of Canada,” *Canadian Journal of Mental Hygiene*, 1, 3, 1919, pp.224-226; Government of the Province of British Columbia, Royal Commission of Mental Hygiene, “Immigration”, *Report of the Royal Commission on Mental Hygiene* (Victoria: King’s Printer, 1927), pp. CC29-CC31, CC43-CC46; McLaren, *Our Own Master Race*, pp. 46-67; Barbara Roberts, “Doctors and Deports: The Role of the Medical Profession in Canadian Deportation, 1900-1920,” *Canadian Ethnic Studies*, 18, 3, 1986, pp. 17-36; Barbara Roberts, *Whence they Came: Deportation from Canada 1900-1935* (Ottawa : University of Ottawa Press, 1988); Patrick Dunae, “Waifs: The Fairbridge Society In British Columbia, 1931-1951”, *Historie Sociale/Social History*, 42, 1988, pp. 225-250; and Zlata Godler, “Doctors and the New Immigrants”, *Canadian Ethnic Studies*, 9, 1977, pp. 6-17.

⁴¹ For discussions of MacMurchy’s work in eugenics, see Dowbiggen, *Keeping America Sane*, pp.162-167 and McLaren, *Our Own Master Race*, p.30-45.

⁴² Sutherland, *Children in English Canadian Society*, pp. 76-77.

⁴³ “Discusses Problem of Mental Defectives”, *Daily Colonist*, March 21, 1917, p. 7. Winn’s comments were echoed by the Royal Commission on Mental Hygiene:

Winn's message was clear: through their economic, social and biological deviancy the mentally deficient presented a danger to British Columbia that could not and should not be ignored. And it was not. In 1919 the Provincial Secretary, Dr. J. D. Maclean, following the lead of Manitoba, requested that the Canadian National Committee for Mental Hygiene conduct a survey of the province's mental hygiene programmes and offer advice for better combating mental deficiency in the province.⁴⁴ Moreover, in 1925 the Legislative Assembly appointed a royal commission, called the Royal Commission on Mental Hygiene, to examine ways to combat the perceived increase in the number of mentally deficient individuals in the province. The recommendations of this body were one of the major factors that ultimately led to the passing of British Columbia's Sexual Sterilization Act in 1933.

One of the first responsibilities the commissioners faced was defining what the term "mental deficiency" meant. While definitions of mental deficiency had existed in English law since the Middle Ages and had been further developed by the work of a number of eugenicists,⁴⁵ this task was far from easy. From the mid-nineteenth century, medical and educational professionals (not to mention lay people and legislators) had "invoked a myriad of different terms to identify people as intellectually below average."⁴⁶ Moreover, the way in which such terminologies were employed was anything but exact. The term *feble-minded*, for example, was at once used to refer to the entire class of people who would today be categorised as

[W]e have no hesitation in reaching the conclusion that mental deficiency creates a great burden on the community, and that it contributes largely to dependency, delinquency, crime, prostitution, illegitimacy, vagrancy, and destitution.

Government of the Province of British Columbia, Royal Commission on Mental Hygiene, "Mental Deficiency: Care and Treatment of Subnormal Children", *Report of the Royal Commission on Mental Hygiene* (Victoria: Charles F. Banfield, 1927), pp. CC21-23.

⁴⁴ Canadian National Committee for Mental Hygiene, "Mental Hygiene Survey of the Province of British Columbia, *Canadian Journal of Mental Hygiene*, 2, No. 1, 1920, pp. 3-59.

⁴⁵ Neugebauer, "Mental Handicap in Medieval and Early Modern England", pp 22-24. See for example Highmore, n. 33 above and D. Collinson, *A Treatise on the Law concerning Idiots, Lunatics and other persons non compos mentis* (London: R Wilks, 1812).

⁴⁶ Noll, *Feeble-minded in Our Midst*, p. 1

intellectually disabled, and to ‘high grade’ mental deficient.⁴⁷ In fact, authorities differed considerably in their understanding of what characteristics defined ‘mentally deficiency’. Thus, an individual defined by one professional as mentally deficient was often not mentally deficient according to another.⁴⁸ Indeed, even though differences between mental deficiency and mental illness had been recognised since the medieval period,⁴⁹ the commissioners noted that it was “desirable *again* to stress the necessity of *making a clear distinction* between the two broad classes of mentally abnormal person” (emphasis added),⁵⁰ thereby indicating that there was still in many peoples’ minds considerable crossover between the two categories.⁵¹ The commissioners differentiated between insanity and mental deficiency by stressing that insanity was a curable disease of a “normally developed mind”, while mental deficiency was an intractable condition of “arrested mental development” whose victims’ mental capacity never progressed beyond that of a child.⁵² The commissioners then proceeded to describe the levels of graduation within mental deficiency, again stressing that mentally deficient individuals had the minds of children:

According to general practice, the term “idiot” is used to denote mental deficient with a “mental age” of 3 years or less; “imbecile” is used to indicate individuals with a mental age of 3 to 7; while the terms “moron” and “feeble-minded” are applied to those whose mental ages are from 7 to 11 years.⁵³

⁴⁷ Noll, *Feeble-minded in Our Midst*, pp.1-2. Government of the Province of British Columbia, Royal Commission on Mental Hygiene, “Report of Commission on Mental Hygiene,” *Final Report of the Royal Commission on Mental Hygiene* (Victoria: Charles F. Banfield, 1928), p. G4.

⁴⁸ Meghan Burn, for example, was classified alternately as an imbecile, an idiot, and not suffering from mental deficiency at all. Abigail Hunt was classified as an idiot, the lowest category of mental deficiency, despite doctors describing her as “[I]ntelligent and well educated.” Albert McGrew was described as insane by one of his admitting doctors and as an imbecile by the other [*MHS*, Box 5, File 761; Box 20, File 1975; Box 23, File 2329].

⁴⁹ Neugebauer, “Mental Handicap in Medieval and Early Modern England”, pp.34-35.

⁵⁰ Royal Commission on Mental Hygiene, “Report of Commission on Mental Hygiene,” p. G4.

⁵¹ The admission records include numerous examples of individuals diagnosed as mentally deficient who seem to be suffering psychiatric problems rather than innate intellectual ‘defects’. Indeed, in some cases patients’ admittance files were altered at a later date from a term for mental deficiency (usually *idiot*) to a descriptor for a mental illness, such as schizophrenia. In another case, a man classified as insane by Vancouver’s Saint Paul’s Hospital was later diagnosed as being mentally deficient [*MHS*, Box 9, File 1136; Box 17, File 1975; Box 17, File 1823; Box 20, File 2066 and British Columbia, Essondale Provincial Mental Hospital Admission Registers, Gr-1754, Vol. 1, Registration Numbers 2494, 2535, British Columbia Archives and Record Services, hereafter cited as *EPM*].

⁵² Royal Commission on Mental Hygiene, “Report of Commission on Mental Hygiene,” p. G4. Also see Royal Commission on Mental Hygiene, “Mental Deficiency: Care and Treatment of Subnormal Children”, p.CC21.

⁵³ Royal Commission on Mental Hygiene, “Report of the Commission on Mental Hygiene,” p.G5.

Echoing the words of Bertha Winn and a myriad of eugenicists, they also stated that:

Neglect of mental deficient leaves them free to cause grave social evils by their delinquencies and depredations... Under proper treatment and by continuous care and training it is possible to make them acceptable, happy, and to some extent useful members of society.⁵⁴

These passages not only indicate the influence of eugenics ideologies among British Columbian authorities, but also the factors that led mentally deficient children in British Columbia to become both the victims of daemonisation and of “fractures in social regulation.” Medical and educational professionals constructed the “affliction” of mental deficiency in such a way that individuals so labelled, no matter what their age, appeared as children in the eyes of the authorities. Like ‘normal’ children, such individuals required care and protection both to ensure their safety and comfort in an often- hostile world and to further their development into useful citizens. However, while ‘normal’ children would grow out of this need for care and guidance as they reached adulthood and gained the skills necessary to become successful and constructive members of society, the arrested mental development of mentally deficient meant that they would never grow out of their need for supervision and assistance. The state would always have to watch over them. Moreover, as well as requiring government assistance throughout their lives so that they might become “acceptable, happy, and to some extent useful members of society,” the commissioners believed that, unless controlled, mentally deficient children’s “delinquencies and depredations” threatened the well being of British Columbian society. Indeed, specialised schooling was required if they were to develop any measure of economic and social competency. This view was reinforced by the belief that placing mentally deficient children in regular schools only exacerbated their condition, and thereby the threat they presented to society. As the Royal Commission on Mental Hygiene stated:

⁵⁴ Royal Commission on Mental Hygiene, “Report of Commission on Mental Hygiene,” p.G4.

[I]n school they [mentally deficient children] are from two to four years behind other children of the same age. Shamed by their failure to progress with their fellows, they eventually drop out of school and go into the world unequipped to meet the demands placed on them as citizens... and it is, therefore, not strange that they often find themselves in the gaols, reformatories, and houses of refuge.⁵⁵

Although the city of Vancouver had maintained two special classes for “low grade defectives” (idiots and imbeciles) between 1911 and 1917, it was not until the provincial government provided custodial care for these children in 1918 that civic authorities attempted to segregate the majority of mentally deficient pupils from the ‘normal’ student body. In 1918-1919 Vancouver’s school board began to actively ‘hunt out’ ‘high grade defectives’ from among the student population through the use of psychological testing. Once these children had been ‘discovered’, they were placed in special classes. By the end of 1920 the board had placed 205 ‘subnormal’ pupils in 15 special classes across the city. Similar classes were established in Victoria.⁵⁶ Recognising the ‘diminished’ intellectual capabilities of their students, special classes placed an emphasis on teaching employment skills rather than the three “Rs” (reading, ‘riting, ‘rithmetic).⁵⁷ Although it is possible to see these classes as havens where mentally deficient children could learn skills that would allow them to take their place in society, and the classes were certainly presented as such by some educationalists and reporters,⁵⁸ authorities were

⁵⁵ Royal Commission on Mental Hygiene, “Report of the Commission on Mental Hygiene,” p.G5.

⁵⁶ Sutherland, *Children in English Canadian Society*, p. 76; Gerald E. Thomson, *Remove From Our Midst These Unfortunates: A historical into the influence of eugenics, educational efficiency as well as mental hygiene upon the Vancouver school system and its special classes, 1910-1969* (Doctoral Dissertation: University of British Columbia, 1999), p.158.

⁵⁷ MacMurchy advised teachers not to waste their time on attempting to teach their defective students difficult things such as reading, writing, and arithmetic, but rather to focus on occupational training. Equally, in a report given to the Toronto Board of Education after inspecting a number of classes for the mentally deficient in the United States, W.E. Groves quoted one of the teachers she interviewed as saying that teachers often only gave defective children enough academic work “to sop to [their] parents.” These ideologies echoed the special needs education policies of New Zealand, Australia, and Great Britain during the same time period. See Thomson, *Remove From Our Midst These Unfortunates*, p.180-181; E. W. Fuller, “General Role of an Institution for Mental Deficients,” in Government of the Province of British Columbia, Royal Commission of Mental Hygiene, *Final Report of the Royal Commission on Mental Hygiene*, (Victoria: Charles F. Banfield, 1928), p. G11; W.E. Groves, “Special Auxiliary Classes: Report Given to the Toronto Board of Education after visiting a number of Auxiliary Classes in the United States”, *Canadian Journal of Mental Hygiene*, 1, 2, 1919, p.186; Mackellar, *The Treatment of Neglected and Delinquent Children*, p.93, 96. MacMurchy, “Letter to Inspectors, Principals and Teachers”, *Canadian Journal of Mental Hygiene*, 1, 3, pp.269-277; and Trent, *Inventing the Feeble Mind*, p. 107.

⁵⁸ “Miss Winn and Her Pupils”, *Daily Colonist*, March 9, 1919, p.12.

ultimately less concerned with developing “mentally deficient” children’s self-esteem and dignity than with making certain that they became less of a burden to society. Indeed, in advocating training schools for the “mentally deficient,” writers stressed the economic advantages that the province would receive rather than the benefits ‘defective’ individuals would obtain. That these classes were seen as ‘industrial training centres’ is demonstrated by the way they were visually promoted to the public. ‘Promotional’ photographs depicted students from special classes employed at gardening, at workbenches, or learning a myriad of other ‘useful’ skills.⁵⁹ In a similar vein it became a tradition after the First World War for Vancouver’s special classes to display student crafts to the public at the Vancouver Exhibition (now called the Pacific National Exhibition).⁶⁰ Equally, Josephine Dauphinee, director of Vancouver’s special schools 1911-1941,⁶¹ defended their (considerable) cost by stating that “[w]e feel... the cost of the work is small, when viewed in dollars and cents, [as it is] a preventative of pauperism, vagrancy and crime.”⁶² However, perhaps the most telling indicator that special classes were run for reasons of economic utility rather than concern for ‘bettering’ the children is the fact that such classes were designed only for “high grade defectives.” “Imbeciles” and “idiots” were not included. While this ban can be viewed as recognition of the fact that some children were unable to actively participate in vocational training due to the severity of their intellectual impairment, it also demonstrates that authorities were unwilling to “waste” educational resources on those children they considered “uneducable.”⁶³

⁵⁹ Thomson, *Remove From Our Midst These Unfortunates*, p.163a.

⁶⁰ Special classes work was also displayed the offices of the Vancouver School Board. Thomson, *Remove From Our Midst These Unfortunates*, pp. 174a, 177a.

⁶¹ For an excellent short biography of Dauphinee, see Thomson, *Remove From Our Midst These Unfortunates*, p.150-151.

⁶² Thomson, *Remove From Our Midst These Unfortunates*, p.181.

⁶³ Dauphinee argued that any attempt to teach idiots and imbeciles even the simplest forms of unskilled menial labour was a futile task, and that these children would only be “safe and happy” under permanent custodial care. The Royal Commission of Mental Hygiene echoed her views. It should be noted despite these beliefs a number of individuals and groups in British Columbia, including the University Women’s Club, argued that some children held in custodial care and considered “incapable of receiving instruction” should receive manual training. Although it

As well as injuring themselves by attending normal schools, eugenicists also believed that mentally deficient children impeded the education of their “normal” classmates by hindering classroom efficiency. As J. S. Gordon, Inspector of Vancouver Schools, noted in 1921:

It has been found that the removal of special class children from ordinary classes makes it possible to increase the size of the latter and to do better work than could be done in smaller classes handicapped by the presence of subnormal pupils.⁶⁴

Moreover, many British Columbian educationalists believed that as well as detrimentally affecting classroom efficiency, mentally deficient children would also negatively affect any ‘normal’ children whom with they came in contact.⁶⁵ Some even implied that ‘mental defect’ was physically contagious.⁶⁶ In other words, mentally deficient children were painted as a direct threat not only to the education of ‘normal’ children, but also to their mental health. Indeed, Gerald E. Thomson has argued that real purpose of Vancouver’s special classes was, at least at their outset, not specialised education but rather eugenic segregation. The mentally unfit were removed from the classroom so that the fit could proceed without threat or hindrance to either their health or educational progress.⁶⁷ Furthermore, by segregating mentally defective children

was argued that such training would “react favourably on the children concern”, the reasoning behind this agitation was unabashedly economic (and directly presented as such). By receiving instruction in shoemaking, carpentry and other trades, the children in question “might be enabled to earn part at least of their maintenance... In other words... non-producers may be made partially productive...”

There is also evidence relating to both Great Britain and New Zealand of authorities banning “low grade defectives” from training institutions because they were deemed as a waste of resources. Indeed, the unwillingness to waste resources on “uneducable idiots” can be seen as the major reason behind the resignation of George Benstead, the first principal of New Zealand’s Otekaike Special School for Boys, in 1917. Benstead was forced to resign after he was accused of allowing the school to become a dumping ground for “low grade custodial cases.” See “Urge Appointment of Psychiatrist”, *Daily Colonist*, March 3, 1922, p.8; “State Should Guard Subnormal Child”, *Daily Colonist*, October 12, 1922, p. 6; Thomson, *Remove From Our Midst These Unfortunates*, p.158; “Mental Deficiency: Care and Treatment of Subnormal Children”, p. CC21; David Gladstone, “The Changing Dynamic of Institutional Care: The Western Countries Idiots Asylum 1864-1914”, in David Wright and Anne Digby ed, *From Idiocy to Mental Deficiency: Historical perspectives on people with learning disabilities* (London: Routledge, 1997) ,p. 157; and Stephen Bardsley, *The Functions of an Institution: The Otekaike Special School for Boys* (B.A. (Honours) Thesis: Otago University, 1991), p.7.

⁶⁴ J.S. Gordon, quoted Thomson, *Remove From Our Midst These Unfortunates*, p.175. Also see Thomson, *Remove From Our Midst These Unfortunates*, pp.85, 160, 172.

⁶⁵ “The Subnormal Child Is Considered”, *Daily Colonist*, April 19, 1922, p.1; and Thomson, *Remove From Our Midst These Unfortunates*, p. 226.

⁶⁶ Thomson, *Remove From Our Midst These Unfortunates*, p. 303.

⁶⁷ Thomson, *Remove From Our Midst These Unfortunates*, p.160.

into special classes (in the case of “high grade defectives”) or custodial care (in the case of “low grade defectives”), eugenicists insured their control over the ‘unfit’ and thereby ameliorated the eugenic danger they presented to society.

When examined in its entirety, the treatment of mentally deficient children by British Columbian educationalists indicates a number of things about the way in which eugenics ideologies informed both the treatment and the perception of mentally deficient children. First, while ‘normal’ children were seen less as an economic unit, the defective child was still judged in economic terms. While education for ‘normal’ children aimed to provide the educational and social tools that they would need to operate successfully in society, education for the mentally deficient child was designed simply to stop them from becoming a burden to the state. Second, the segregation of mentally deficient children from ‘normal’ children meant that the former were seldom offered opportunities for mixing with their peers and thereby making social contacts within the greater community. Equally, and more importantly, it also differentiated them from ‘normal’ children geographically, visually and educationally. Indeed, it pathologised them by presenting them as a ‘threat’, which like cancer needed to be removed in order to ensure the health of society as a whole.



With the above in mind it is not surprising that some British Columbia schools refused to admit “defective” children into their classes. In 1920 after the administrations of schools at Grand Forks and Cascade had refused to enrol a thirteen-year-old girl named Ruth, described as having a “brain that has not properly developed,” an anxious mother wrote to the Superintendent of Neglected Children to ask that he provide her with information as to where she could place

Ruth so that her daughter might receive an education.⁶⁸ Declaring that Ruth was “willing [and] bright but oh it is such a trouble to [watch] over her,” the woman further stated that as both she and her husband were “only working people... [we] could not afford to pay much [for any specialist education the superintendent might recommend].”⁶⁹ This concerned mother’s comments are indicative of both the trouble some parents faced in finding adequate schooling for their mentally deficient children, and of the very real problems that many families faced when trying to raise mentally deficient children. Ruth’s parents were worried not only about finding their daughter some form of schooling, but also the cost of said schooling and the fact she had to be watched constantly.⁷⁰

It was situations such as Ruth’s that caused authorities to conclude that parents were ill-equipped to provide the guidance that the mentally deficient required, and that mentally deficient individuals threatened the mental and physical health of their parents and siblings. Indeed, the Commissioners stated in their report that “[The] care [of idiots and imbeciles] in the average home is too great a burden and too often results in break-down of other members of the family.”⁷¹ Either way some authorities argued that it was better for the province to take control of these children, even against their parents’ wishes.⁷²

⁶⁸ Letter from Mrs Albert to the Dr. E.S.H MacLean, Provincial Secretary, August 4 1920 [British Columbia, Provincial Secretary Correspondence 1918-1926, Re: New Building on Colony Farm for Defectives, GR-0344, Box 1, File 5, British Columbia Archives and Records Service, hereafter cited as *PS*]. A subsequent letter from the M.P.P. for Grand Forks, Mr E.C. Henniger, to the Minister of Education stated that Ruth was an incurable epileptic who was “deficient both mentally and physically [sic].” See Letter from E.C. Henniger, M.P.P., to the Minister of Education, August 22 1920, *PS*, Box 1, File 5.

⁶⁹ Letter from Mrs Albert, *PS*, Box 1, File 5.

⁷⁰ If this was the case Ruth’s parents’ endeavours to have her placed in a school and her mother’s request to the Superintendent of Neglected Children for aid could be constructed as a limited form of what David Wright has called “strategic confinement”. See David Wright, “Families’ Strategies and the Institutional confinement of ‘idiot’ children in Victorian England”, *Journal of Family History*, 23, 2, 1998, pp. 190-208. Also see M. Friedberger, “The Decision to Institutionalize: Families with exceptional children in 1900”, *Journal of Family History*, 6, 4, 1981, pp. 396-406.

⁷¹ Royal Commission on Mental Hygiene, “Mental Deficiency: Care and Treatment of Subnormal Children”, pp. CC21. This statement echoed similar comments made in both the United Kingdom and the United States. For example, in 1909 by Mrs. Hume Pinsent, the Chairperson of the Birmingham Special Schools Committee noted “[t]he great majority [of mental defectives] are still without the care and control they so aptly need. This is not only deplorable for them, but meanings wearing out the overburdened mother, and often spoiling the lives and chances of

The belief that mentally deficient individuals placed families under huge strain was not without factual basis. The economic realities of life in British Columbia during the period under consideration, especially in rural communities, often meant that parents were unable to provide the care and supervision that their “defective” children required without adversely affecting the family’s economic productiveness. Indeed, the Provincial Hospital for the Insane’s admissions records for 1894 contain the pitiful account of one single mother who had been driven to destitution by her “defective” son’s need for constant supervision, which had left her unable to work.⁷³ Another single parent, Robert Garfield, state that work commitments meant that he was unable to provide his eleven-year-old son Michael – who would wander away if left unsupervised – with “the proper care and attention” he required. As a result, he was forced to tie Michael up at home. Robert acknowledged that binding his son was “a cruelty” but defended his actions by stating that he had to do so or Michael “would... get lost... if he got away he would be liable to fall into the river or get killed in other ways by falling over precipices.” The doctors who admitted Michael into institutional care also noted that he would destroy property if he was left unsupervised for any length of time.⁷⁴

However, while there is no doubt many mentally defective children did place a huge strain on family economies, the point should not be overstressed. An examination of asylum records also reveals that some mentally defective individuals were involved in productive labour before their institutionalisation. A prime example of such an individual is Joseph McCray, an inhabitant of one of British Columbia’s smaller Gulf Islands. Although Joseph’s entry in the

normal brothers and sisters.” While in 1931 the superintendent of South Carolina’s State Training school, Benjamin O. Whitten, stated “[m]any families are completely disorganised because of their inability to properly care for their defective child...” Mrs. Hume Pinsent, quoted by Dr. George Benstead, principal of New Zealand’s Otekaike Special School for Boys, in his annual report. “Education: Special Schools and Infant Life Protection”, *Appendix to Journal of the House of Representatives* (Wellington: Government Publisher, 1910, p.13). Benjamin O. Whitten, quoted by Noll, *Feeble-minded in Our Midst*, p.135. Also see Noll, *Feeble-minded in Our Midst*, p.134.

⁷² “Legislature Deals with Various Bills”, *The Daily Colonist*, February 27, 1920, p.12.

⁷³ *MHS*, Box 3, File 555.

⁷⁴ *MSH*, Box 19, File 1925.

P.H.I.'s admissions book states that he had no occupation, his brother-in-law noted in the form he filed with the local magistrate requesting Joseph's committal that "he will work when he takes the notion."⁷⁵ While Joseph's work may not have generated income for his family, the fact that his brother-in-law – who had little else good to say about Joseph other than "He don't drink" – chose to mention this would seem to indicate that Joseph did usefully contribute to his family's economic survival.⁷⁶ Nor is Joseph the only example of a mentally deficient individual to be found in P.H.I.'s case files who provided economically productive labour for his/her family. Under the heading of occupation in Melody Smith's record of admittance one finds the word "housework" recorded. Angus Jonstone said his son Richard "sometimes worked like a Trojan," while Alfie Rowan's mother complained it was "hard to teach [him] *new* chores or tasks around the house."⁷⁷ (Italics added.) While this last statement might seem to indicate that Alfie did not help his mother with the successful running of their home, reconsideration of Mrs Rowan's statement hints otherwise. Rather than stating that Alfie did nothing around the home, Mrs Rowan told doctors that it was hard to teach him *new chores*. This would seem to indicate that Alfie did know how to do some chores. Moreover, while Mrs Rowan stated that it was *hard* to teach Alfie new chores, she did not say it was *impossible*. Taken together, it is highly possible that Alfie did usefully contribute, albeit in a limited way, to his family's economic survival and could, with some hardship, be taught new ways of contributing if the need arose.

Considerable evidence also exists to suggest that some mentally deficient British Columbians held wage-earning positions before their institutionalisation.⁷⁸ Given these

⁷⁵ MSH, Box 8, File 1028.

⁷⁶ It is evident from Joseph's admittance records that his brother-in-law had very little time for him. It is also evident that the dislike was mutual; Joseph is recorded as having attempted to brain his brother-in-law with an axe in the month before his committal to P.H.I. (MHS, Box 8, File 1028).

⁷⁷ EPM, Vol. 1, Registration Number 2701; MHS, Box 14, File 1527 and Box 27, File 2762.

⁷⁸ Included in these positions were charwomen, delivery boy, domestic, labourer, laundry worker and fisherman (EPM, Vol. 1 and 2 Registration Numbers 30, 646, 1339, 1572, 3351, 3433, 3943, 3962, 4173, 4257, 4535, 4788, 4833).

individuals' ages at the time of admittance, usually early-to-mid-twenties, this information is important for a number of reasons. First, it demonstrates that some mentally deficient individuals were capable of successfully navigating the cash-nexus of British Columbian society. This fact in itself questions the claims of eugenicists that the mentally deficient needed special training in special schools/institutions, since they had obviously gained needed skills already. Second, it demonstrates that many mentally defective individuals avoided institutionalisation well past childhood. These observations present two possibilities. First, their disabilities manifested themselves in later life due to illness or accident.⁷⁹ Or, second, these patients had in fact been intellectually disabled from birth, or very early age, and had been employed and protected by their parents until their parents had died or had lost the ability to care for them. While both these possibilities were undoubtedly the case in number of instances, in others they were not. Not only were some of these individuals in their late thirties and forties at the time of their incarceration, some of the admittance records make no mention of family or friends at all.⁸⁰ In other words, it seems that these individuals had found employment and accommodation for themselves. Admittedly this is only speculation, as on occasion admitting doctors were less than clear in their comments when referring to a patient's employment history or the employment statues of his/her father or guardian, but the number of individuals admitted to P.H.I who were described as being employed, and for whom no mention of guardians of any sort was given, should not be ignored. Moreover, the fact that across the western world only relatively small numbers of mental deficient, compared to the estimated total population,⁸¹ were incarcerated in institutions would further suggest that at least some mentally deficient individuals were capable of successfully navigating their way through the reefs and shoals of society.

⁷⁹ *EPM*, Vol. 1, Registration Numbers 989, 3277.

⁸⁰ See, for example, *MHS*, Box 1, File 30 and Box 18, File 1793.

⁸¹ See note 4 above.

Colonial British Columbia's economic and geographic characteristics probably played more than just a supporting role in mentally deficient people's long-term institutional avoidance. It would be reasonable, for example, to expect that individuals with a slight mental defect would have found work as labourers in BC's many primary resource communities where economic necessity and local conditions privileged physical strength over intellectual prowess. Furthermore, British Columbia's geography of many small, isolated communities severely restricted the government's attempts to identify the "mentally defective" within its population.⁸²

This problem was especially evident in relation to schools. Neil Sutherland has shown that Canadian schools – through standardised testing and health checks - played a major part in bringing to the attention of educational authorities those children considered to be mentally deficient.⁸³ Given that a number of British Columbia's smaller and more isolated communities had no schools, it is reasonable to believe that many children who would have been classified as "mentally defective" in Vancouver or Victoria would not have been designated as such in rural areas. Indeed, even if such a community did have a school, such children may have gone unnoticed, or at least unreported because, as Mona Gleason has shown, a significant minority of

⁸² My own unpublished research on admissions into Seaview and Sunnyside asylums in New Zealand between 1854-1912 has unearthed similar examples of long-term institutional avoidance. The New Zealand government attempted to alleviate this problem with the passing of the *Education Amendment Act 1914*, which made it obligatory for parents, teachers, police constables, and other public servants to report "mentally defective" children to the Department of Education. The fact that this act was passed seven years after the *Education Amendment Act 1907*, which had first made education compulsory for defective or epileptic children between the ages of six and twenty-one, and that it stipulated significant fines for those who failed in their duty to report "mentally defective" children, would seem to indicate that many of these children were eluding the institutional net [New Zealand, Seaview Register of Patients 1869-1912, CH 22/73, Patient Numbers 222, 442, 453, 522, Archives New Zealand Te Whare Tohu Tuhituhinga o Aotearoa, hereafter cited as *SRP*; New Zealand, Sunnyside Lunatic Asylum Registers of Admission 1854-1890, CH 388 /1-4, Patient Numbers 14, 34, 45, 53, 96, 100, 297, 301, 356, 372, 392, 393, 570, 1289, 1321, Archives New Zealand Te Whare Tohu Tuhituhinga o Aotearoa, hereafter cited as *SLA*; *New Zealand Education Amendment Act 1907*, s. 15; and *New Zealand Education Amendment Act 1914*, s. 129].

⁸³ Sutherland, *Children in English Canadian Society*, pp. 71-78 and McLaren, *Our Own Master Race*, pp. 38, 91-92. Ian Copeland has examined the roll that schooling played in identifying "mentally defective" children in Great Britain. Ian C. Copeland, *The Making of the Backward Pupil in Education in England, 1870-1914* (London: Woburn Press, 1999).

these education facilities did not receive regular visits from health inspectors, and may not have received any at all.⁸⁴

While this evidence suggests that some mentally deficient individuals could have functioned to some extent in British Columbian society, it is also obvious that many parents worried about the dangers society presented to their mentally defective children. In case of boys, parents generally worried that criminals would prey on their sons' gullibility and draw them into illegal endeavours. Records indicate that these fears were well founded. A gang of thieves in Victoria recruited the eleven-year-old 'idiot' Henry Blain to help them break into houses and commit other acts of theft.⁸⁵ As well as worrying that their daughters would be unwittingly drawn into a life of crime, parents of mentally deficient girls also faced the very real fear that their daughters would be taken advantage of sexually, especially since mentally deficient women were considered to be hyper-sexual.⁸⁶ These fears were expressed by A. Miller, Inspector of Schools for Revelstoke, in a letter to the Provincial Secretary's Office asking for the institutionalisation of a fourteen-year-old girl whose recently widowed mother could no longer control her:⁸⁷

As the girl is now adolescent physically, but only a child mentally, the situation is rather disturbing, particularly as there is a logging camp...[near by]... with all kinds of rough men...[who] would have no scruples about taking advantage of such a girl...[the girl should be placed]...in a proper institution...at the earliest possible moment as...serious trouble may develop any day.⁸⁸

⁸⁴ Mona Gleason, "Race, Class, and Health", pp. 99, 102-103, 107.

⁸⁵ *MHS*, Box 1, File 140.

⁸⁶ Noll, *Feeble-minded in Our Midst*, p.40-41, 113-115 and Peter Taylor, "Denied the Power to Choose the Good: Sexuality and Mental Defect in American Medical Practice, 1850-1920", *Journal of Social History*, 10, 1977, pp. 472-489. The "over development of the sex element in [mentally deficient girl's] mental and physical make was questioned by some experts. See, for example, Fuller, "General Role of an Institution for Mental Deficients", p. G11.

⁸⁷ Since her father's death the girl was reported to have attacked her mother and to have become so unmanageable that she required physical restraint [Letter from the office of the Inspector of Schools (Revelstoke) to Dr. E.S.H. MacLean, Provincial Secretary, December 20, 1920 and Letter from C.F. Nelson, Druggist and Stationer, to Dr. E.S. MacLean, Provincial Secretary, December 29 1920, Provincial Secretary Correspondence 1918-1926, *PS*, Box 1, File 4].

⁸⁸ Letter from the office of the Inspector of Schools (Revelstoke) to Dr. E.S.H. MacLean, Provincial Secretary, December 20 1920, *PS*, Box 1, File 4.

Government officials held the same fears, albeit for slightly different reasons. For while the authorities recognised that both the 'leadability' of 'subnormal' children and their inability to differentiate 'right' and 'wrong' made them vulnerable, the authorities equally stressed the danger these children presented to society. Indeed, although many activists who argued for the segregation of the mentally deficient from mainstream society did so to fulfil the state's 'obligation' to guard the 'subnormal child' from the very real perils of society, a close reading of these activists' arguments indicates that they were more concerned with the dangers the mentally deficient presented to society than *vice versa*.⁸⁹

Despite the realisation that society presented very real dangers to the mentally deficient, authorities sometimes ignored evidence of abuse when reported by the mentally deficient themselves. For example, a report to Vancouver's Juvenile Court in 1923 by one of the court's investigators stated that a thirteen-year-old 'subnormal' girl had "made some unpleasant suggestions" with regard to her stepfather's behaviour towards her, but that the child was "really so mentally defective" it was "hard to understand her, let alone believe her."⁹⁰ The court accepted the investigator's analysis of the girl's "unpleasant suggestions," which suggested she was being sexually abused by her stepfather, and made no attempt to investigate the veracity of the girl's story. Given that authorities were quick to use 'subnormal girls' use of sexually suggestive language as justification for incarcerating them,⁹¹ the investigator's lack of respect for this girl's comments not only indicates that the authorities took little stock in the cognitive abilities of mentally defective children or of their ability to tell the 'truth', but also that the authorities were much more focussed on finding fault in these children than in seeing them as

⁸⁹ "Discusses Problem of Mental Defectives", *Daily Colonist*, March 21, 1917, p. 7 and "State Should Guard Subnormal Child", *Daily Colonist*, October 12, 1922, p. 6.

⁹⁰ Report of E.D. LeSueur to Vancouver Juvenile Court, February 23, 1923, *PS*, Box 1, File 8.

⁹¹ For example, one of the major factors leading to Sarah Thomas' admittance to P.H.I. in 1895 was her "insane sexual desire" which - according to both Sarah's mother and the admitting doctors - was evidenced by Sarah's repeated use of lewd language and her saying that she wanted to become a prostitute in order to earn money to buy clothes (*MHS*, Box 4, File 646). Also see Noll, *Feeble-minded in Our Midst*, p. 113-114.

victims. Indeed, it is fair to say that mentally deficient children were treated in much the same way as children labelled 'delinquent'.⁹²

If some families worried that they could not adequately provide for the care of their mentally deficient members, others worried about the physical danger these individuals presented to themselves or other people. Charles Wick, for example, was committed to P.H.I. in September 1906 at the age of 15 because of the increasing danger he was seen to present to his family. In the few months before his incarceration Charles had not only viciously attacked his mother, but also repeatedly threatened to kill his younger brother.⁹³

Some parents were equally concerned about the impact that their mentally deficient children would have on their social standing. A number of factors explain this anxiety. First, a mentally deficient child's lack of social competency could lead the child to perform acts – such as screaming, “gibbering”, or soiling themselves – that were outside social norms and might embarrass their parents, especially if the behaviour occurred in a public place. If a child's acts were potentially dangerous, either physically or morally, then his or her parents could have faced ostracism in their communities and, perhaps, the unwelcome attention of the authorities.⁹⁴

Second, in the case of those mental conditions that were accompanied by noticeable physical 'defects', such as microcephaly or macrocephaly, parents faced the very real stigma of having children who not only 'acted funny', but also looked 'unusual'. This embarrassment may have been reinforced by the increased 'visibility' of mental deficiency during the period 1870-1930 due to freak shows and the rise of photography. Between 1870-1930 the freak show

⁹² For studies of the treatment of delinquent children in Canada see, Franca Iacovetta, “Gossip, Contest, and Power in the Making of Suburban Bad Girls: Toronto, 1945-60”, *The Canadian Historical Review*, 80, 4, 1999, pp. 585-623; Tamara Myers, “The Voluntary Delinquent: Parents, Daughters, and the Montreal Delinquents' Court in 1918,” *Canadian Historical Review*, 80, 2, 1999, pp.242-268; and Joan Sangster, ““She is Hostile to Our Ways’: First Nations Girls Sentenced to the Ontario Training School for Girls, 1933-1960”, *Law and History Review*, Spring, 2002, pp.59-96.

⁹³ MHS, Box 17, File 1818.

⁹⁴ See, for example, the case of Henry and Oscar Fraser below.

reached the height of its popularity in North America. In many of these shows individuals who suffered from intellectual and physical defects were paraded in front crowds under the less than complementary labels of 'wild men', 'missing links', and 'pinheads'.⁹⁵

At the same time as freak shows exhibiting mental deficient individuals were reaching the zenith of their popularity, the use of photography to identify the mentally deficient was also becoming common. As Mark Jackson has noted, photographs allowed mental defectives to be seen, identified, and thereby tracked by society to an extent never before possible. It also allowed their classification into readily identifiable groups. Thus, whereas before a child with a physically identifiable intellectual condition, such as Down's Syndrome, might simply have been seen as 'different' or 'strange', the rise of photography meant that that child could be readily labelled as 'defective'.⁹⁶ Indeed, a perusal of P.H.I.'s records reveals a number of occasions where doctors based or supported their diagnosis of mental deficiency by referring to an individual's 'defective' physical characteristics. The aforementioned Michael Garfield, for example, was described as "small for his age, except [for his] head which is oversized." Another patient's appearance was characterised in the following manner: "...microcephalic head, very flat and slanting occipital, low unintelligent forehead, illshapen [*sic*] ears... teeth very irregular particularly those of the lower jaw... infantile genitalia..."⁹⁷

Third, a number of parents may have been embarrassed by their mentally defective children because of what their children's conditions implied about them. Many educational and medical professions, not to mention lay people, believed that mental deficiency could directly be

⁹⁵ R. Adams, *Sideshow U.S.A: Freaks and the American Cultural Imagination* (Chicago: Chicago University Press: 2001).

⁹⁶ M. Jackson, "Images of Deviance: Visual Representations of Mental Defectives in Twentieth Century Medical Texts," *British Journal for the History of Science*, 28, 1995, pp. 319-37. Also see Martin S. Pernick, *The Black Stork: Eugenics and the Death of "Defective" babies in American Medicine and Motion Pictures Since 1915* (New York: Oxford University Press, 1996) and Volpe, "Is Down Syndrome a Modern Disease?"

⁹⁷ MHS, Box 19, File 1925 and Box 30, File 3027.

linked either to bad parenting⁹⁸ or, as discussed above, to hereditary defect. Moreover, in some cases a mentally deficient child was seen as punishment for breaking the laws of God. Samuel Gridely Howe, the chair of the Commonwealth of Massachusetts commission on idiocy, had stated the following in his highly influential 1848 work *On the Causes of Idiocy*:

It may be assumed as certain, that in all cases where children are born deformed, or blind, or deaf, or idiotic, or so imperfectly and feebly organised that they cannot come to maturity under ordinary circumstances, or have the seeds of early decay, or have original impetuosity of passions that amount to moral insanity, - in all such cases the fault lies with the progenitors. Whether they sinned in ignorance or in wilfulness, matters not as to the effect of the sin upon the offspring. The laws of God are so clear that he who will read may do so.

He continued:

The moral to be drawn from the existence of individual idiots is this, - he, or his parents, have so far violated the natural laws, so far marred the beautiful organism of the body, that it is an unfit instrument for the manifestation of the powers of the soul...⁹⁹

In light of both the embarrassment and social stigma that a mentally deficient child could cause his or her parents, it is unsurprising that some parents chose to hide their mentally defective children from prying eyes. Peter Cox's mother, for example, placed him in P.H.I. in 1903 when he was approximately six years of age¹⁰⁰ and paid for his upkeep through an intermediary - G.J. Smith, Superintendent of the Children's Aid Society - until her death in 1919. On reporting her death to the medical authorities, Smith stated that he had "kept her secret religiously all these years."¹⁰¹

It is highly likely that other children were hidden from view by their parents in less than favourable circumstances, such as being imprisoned within the family home. Admittedly, finding

⁹⁸ "Some Children are Reared in Chaos Here," *The Daily Colonist*, Saturday, February 21, 1920, p.9 and "Establishment of Parental Homes is Urged on Council," *Victoria Daily Times*, Saturday 28, 1920, p24.

⁹⁹ Samuel G. Howe, *On the Causes of Idiocy; being the supplement to a report by S.G. Howe and the other commissioners appointed by the Governor of Massachusetts to inquire into the condition of the idiots of the Commonwealth*, Chris Borthwick and Murray K. Simpson, ed., <http://www.personal.dundee.ac.uk/~mksimpso/howe.htm>

¹⁰⁰ Peter's records do not provide exact age. At the time of his in 1924 he was stated to be "about thirty" (MHS, Box 13, File 1459).

¹⁰¹ Given that there is no mention of Peter having a father in any of his records, Superintendent Smith might also have been keeping the identity of Peter's mother a secret because Peter was illegitimate.

these children is an almost impossible task for the historian. Unless they were discovered by the authorities, or mentioned in family or community memoirs, one is unlikely to find any evidence that they existed at all. This is especially the case for children who lived in isolated rural areas where there was little state supervision. That said, evidence from other countries with political and social characteristics similar to British Columbia strongly argues for the existence of these 'ghost children' and offers some insight into the experiences they may have faced. One such example comes from the Patient Casebook of the Sunnyside Asylum, in Christchurch, New Zealand. In 1890 police officers acting on a tip discovered a 25-year-old mentally deficient man locked in a room in his father's house. The police estimated that at the time of his discovery the man - who was naked, covered in his own faeces and unable to communicate in any fashion - had been imprisoned by his father for at least six years. They could find no information of his life before this time.¹⁰² Although this is a rather extreme case, discoveries of children in more recent times¹⁰³ and the common literary convention of the 'crazy sibling' locked away out of sight perhaps indicates that this practice, although uncommon, was quite widespread. Therefore, historians should be prepared to entertain the possibility that some British Columbian families imprisoned their mentally defective members in order to hide them from sight. This argument is given further weight by the fact that there is considerable evidence, alluded to above, of parents restraining their mentally deficient children. One such child was reported to have been kept "secluded by his friends for fifteen years."¹⁰⁴

However, while many families obviously suffered hardships caused by their mentally deficient members, eugenicists often faced considerable difficulty in persuading the parents of

¹⁰² *SLA*, CH 388/18, Patient Number 29.

¹⁰³ The most famous recent case is that of Genie, who was discovered in Los Angeles in 1970. See *The Secret of the Wild Child* (Boston, Massachusetts: WGBH, 1994, (Video)) and Russ Rymer, *Genie: An abused child's flight from silence* (New York: HarperCollins Publishers, 1993).

¹⁰⁴ Admittedly, in all these cases the community were aware of the existence of these individuals. See *MHS*, Box 12, File 1294 and Box 19, File 1925. Also see Letter from C.F. Nelson, Druggist and Stationer, to Dr. E.S. MacLean, Provincial Secretary, December 29 1920, *PS*, Box 1, File 4.

mentally deficient children and the public at large of the worthiness of their policies. The author of one article in the *Canadian Journal of Mental Hygiene* even went as far as to reject calls by eugenicists for sterilization as a method for combating feeble-mindedness, because the eugenicists had not taken into account “the long period of preparation and education the public will need to support it.”¹⁰⁵ The author further noted that while the segregation and incarceration of the ‘feeble-minded’ was a far more practical than sterilization, it also suffered from a number of ‘public relations’-based problems.¹⁰⁶

Indeed, in many cases eugenicists and provincial legislators pursuing eugenics agendas faced significant opposition from powerful institutions. The Catholic Church, for example, actively campaigned against the passing of British Columbia’s 1933 Sexual Sterilization Bill, and, when it failed to prevent the bill’s passing, strongly condemned the act.¹⁰⁷ Even within governmental and educational circles eugenics did not hold complete sway. For example, while the Royal Commission on Mental Hygiene stressed the danger that mental deficients presented to British Columbia, the commissioners also noted that:

...in the field of mental deficiency[,]... in recent years there has been, among experts in all parts of the world, a definite trend away from the alarmist attitude common about the opening of the present century. The percentage of the general population afflicted by mental deficiency is not increasing.¹⁰⁸

These views echoed a reported presented to the Victoria school board in 1923 by its medical officer, Dr. David Donald. In his report Donald asserted that the idea that Victoria schools were being overrun by ‘mentally defective’ pupils was absurd; in a school population of 6,000 he had

¹⁰⁵ Taft, p.166.

¹⁰⁶ Taft, p.166. Also see “Subnormal Cases Require Provision,” *Victoria Daily Times*, February 27, 1920, p.15.

¹⁰⁷ Indeed, Angus McLaren has argued that the only reason that the Albertan and British Columbian governments were able to pass their respective sterilization acts in 1928 and 1933 was because the Catholic minority in each of these provinces was too small to offer effective opposition. In Ontario and Manitoba, on the other hand, Catholics, while still in the minority, made up a large enough percentage of the population to successfully defeat attempts to pass similar acts. With this in mind it should come as no surprise that eugenics ideologies were at their weakest in Quebec. See McLaren, *Our Own Master Race*, pp. 104, 122-123, 125-126, 149-154.

¹⁰⁸ Royal Commission on Mental Hygiene, “Report of the Commission on Mental Hygiene,” p.G4.

been able to find only eleven children suffering from mental defect.¹⁰⁹ The point made by Donald and the Mental Hygiene Commissioners was clear: Canada, and more specifically British Columbia, was not in danger of being overrun by mental deficient.

As well as questioning the supposed size of British Columbia's mentally deficient population, some members of British Columbia's governing elite even questioned the need for special classes for "high grade defectives" at all. When Bertha Winn delivered a report to the Victoria School Board in 1921 arguing for the expansion of the special schools programme and the removal of all "retarded" children from 'normal' classes, her ideas were strongly attacked by Victoria's School Inspector, Mr. May, who believed that these children should not be segregated: "If they have a spark of intelligence they should be with their classmates. When a child is segregated he [*sic*] carries the stigma of it all through life." Admittedly, May was a lone voice, for, as noted above, authorities during this period were increasingly moving to segregate mentally deficient children from their 'normal' peers. The fact that a school inspector would so publicly challenge the segregation of mentally deficient children demonstrates that it would be incorrect to believe that British Columbia's school boards were bastions of support for eugenics, as often first appears to have been the case.



While some authorities and powerful institutions, such as the Roman Catholic Church, questioned the eugenicist treatment and depictions of the mentally deficient, it is clear that most resistance to the "daemonisation" of mentally deficient children came primarily from their families. Indeed, despite Dr. MacMurchy's claims that it was sadder for parents to rear a mentally deficient child than to experience the death of a 'normal' child, many parents dearly

¹⁰⁹ "Mental Cases in Schools are Few," *Daily Colonist*, August 24, 1923, p.12.

loved their mentally deficient children and were devastated by their deaths. What is more, many were also prepared to fight to keep their children out of institutions.

Angus Johnstone's short letters to asylum staff about his son Richard, who had been institutionalised in November 1904 at fourteen years of age, are a prime example of the devastation that the loss of mentally deficient child could wreak on a loving parent.¹¹⁰ An itinerant miner, Johnstone repeatedly sent letters – often little more than ‘scraps’ of paper – to medical authorities requesting that they send him “[A] few lines about my son,” and notifying them of his change of address.¹¹¹ This correspondence not only reflects Johnstone's love for his ‘idiot’ child but also demonstrates that he thought about Richard frequently and cared about his continued well-being. However, perhaps the strongest expression of Johnstone's attachment and concern for his son can be seen in the letters he wrote in November 1918 about Richard's serious, and ultimately unsuccessful, battle with influenza. Severely ill with influenza himself, Johnstone was under no illusion as to the probable outcome of Richard's illness. In a letter dated November 7, 1918, he explained that he was unable to travel to be with his son because of his own ill health, and then went on to request that if Richard was to die that he be given “the best possible last service under existing circumstances.”¹¹² Hearing of Richard's death from pneumonia eleven days later, Angus Johnstone wrote to A. G Greaves, acting medical superintendent, lamenting the fact that his own illness had rendered him “unable to take a last look at him [Richard] before he passed away.”¹¹³ Nor is Angus Johnstone the only example of a loving parent to be found in P.H.I.'s records. On June 24, 1912, four days after the death of his

¹¹⁰ *MHS*, Box 14, File 1527.

¹¹¹ Johnstone was not the only parent who corresponded with asylum staff requesting updates about their children. That these progress reports were important to some inmate's parents is not only evidenced by those, such as Johnstone, who religiously reported their change of address, but also by those who wrote letters criticising asylum staff for not keeping them inform on a regular basis. Marge Flanders, in a letter requesting information about her son, Ned, pointedly noted that “I have not heard concerning him for a long time” [*MHS*, Box 17, File 1818]. Also see *MHS*, Box 17, File 1772; Box 18, File 1879; Box 23, File 2329 and Box 30, File 3027.

¹¹² A. Johnstone, Letter, November 7 1918, *MHS*, Box 14, File 1527.

¹¹³ A. Johnstone, Letter, November 19 1918, *MHS*, Box 14, File 1527.

twelve-year-old daughter Hannah, François Ben wrote the following note of thanks to the medical superintendent and staff of the hospital for the care that his “little girl” had received:

Now the remains of our little girl... have been laid to rest I am penning these few words... to express... gratitude for the kind treatment our little girl received... the little girl's well kept body spoke volumes for the care bestowed upon her...¹¹⁴

While the fathers of both Richard Johnstone and Hannah Ben demonstrated the love they had for their children through their letters, the parents of Henry and Oscar Fraser expressed their love for their sons by going to great financial lengths to resist the attempts by authorities to institutionalise their ‘defective’ children. Described as ‘idiots’, Henry and Oscar were admitted to the Provincial Hospital for the Insane on December 20, 1904, after repeated run-ins with the Vancouver police for throwing stones at streetcars and people.¹¹⁵ Their stay was to be very short. Five days later the medical superintendent, Dr. Manchester, released the boys on probation into their parents’ care after their father had made a formal promise, in writing, to the medical authorities that he would remodel the family home on Vancouver’s Howe street “to prevent them from running at large to the annoyance of others and to the public danger.”¹¹⁶ The boys’ loving relationship with their parents is further underlined by the letter Manchester wrote to Vancouver’s chief of police explaining his decision to release them. In it he stated, with more than a hint of mystified exasperation, “[T]he sending in of the two [Fraser] boys seems to have been a severe blow to the mother who is apparently greatly attached to them.”¹¹⁷ Manchester further went on to stress that he would be inspecting the renovations made to the Fraser home, and if he found them to be less than adequate or if the boys got into further trouble he would readmit them. Both the renovations to the Fraser house and the subsequent behaviour of Henry and Oscar obviously passed muster, for on July 25, 1905, both boys were given a full discharge

¹¹⁴ F. Ben, Letter, June 24 1912, *MHS*, Box 20, File 2069.

¹¹⁵ *MHS*, Box 14, File 1580 and Box 14, File 1581.

¹¹⁶ *MHS*, Box 14, File 1580.

¹¹⁷ Letter from Dr. G.H. Manchester to the Chief of Police, Vancouver, December 25 1904, *MHS*, Box 14, File 1580.

from P.H.I. Henry was never to be readmitted; Oscar was well into his fifties the next time he became an inmate.¹¹⁸

The case of Henry and Oscar Fraser was not the only time that a medical superintendent wrote to the police to notify them that parents had removed a patient from custodial care. In 1906 P.H.I.'s new medical superintendent, Dr. Charles Doherty, wrote to Nanaimo's Chief of Police, James Crossan, informing him that the family of the 'imbecile' Paul Manning had removed him from P.H.I. against all medical advice. Doherty explained that he feared that without hospital discipline Paul would "develop vicious habits and even might become a criminal." In light of this possibility Doherty requested that Crossan and his men "keep an eye on him, as there is a strong possibility of him becoming a nuisance."¹¹⁹ It seems Dr. Doherty's fears were unfounded, for like Henry Fraser, Paul Manning never returned to P.H.I.

These stories are compelling because they graphically indicate the dual world that mentally deficient children and youths inhabited in late nineteenth and early twentieth century British Columbia. Paul, Henry and Oscar were at once dearly loved by their parents and daemonised by the authorities who constructed them – and thereby attempted to regulate them – as threats to society rather than as a 'children'.



By examining the way in which mentally deficient children were perceived and treated in late nineteenth and early twentieth century British Columbia, it becomes clear that the belief that between 1870 and 1930 children enjoyed a "dramatic change in economic and sentimental value" requires some careful qualification. For, while many child savers were trying to better the lives of 'normal' children, they were also demanding the incarceration and sterilization of 'mentally deficient' children. Indeed, if the results of their actions had not often led to negative

¹¹⁸ Oscar was readmitted in 1943. See *MHS*, Box 14, File 1581.

¹¹⁹ Letter from Dr. C. Doherty to James Crossan, Esq., September 22 1906, *MHS*, Box 17, File 1776.

consequences for children designated as mentally deficient (ostracism, incarceration, and, in some cases sterilization), and for their families (ostracism from their communities and harassment from the authorities who believed that parents could not adequately care for or control their mentally deficient children), one might be forced to smile at the irony that in trying to 'rescue' one group of children British Columbia's child savers actually injured another.

This study has also revealed the 'special' position that mentally deficient children held within the classification systems of many people, and in doing how these children, like the Dionne Quintuplets, were victims of a "fracture in social regulation". All mentally deficient individuals, as a result of their arrested mental development, were constructed by medical and educational professionals as children, no matter what their age, thereby justifying the authorities' claims that mentally deficient individuals would always require the government's supervision and control throughout their lives. Yet, equally, the fact that mental deficients were seen to threaten British Columbian society morally, biologically and economically meant that mentally deficient children were often denied their 'rights' as children. Indeed, rather than being regulated as 'children', more often than not mentally deficient children were regulated on the basis of threats they were believed to present to society. This fact is highlighted in the sphere of education in three ways. First, attempts were made to segregate mentally deficient children from their 'normal' peers in order to prevent them from 'infecting' the 'fit' with their 'defective' characteristics. Second, education programmes for the 'defective' were designed to ensure that they were not burdens to society, rather than to make them "well rounded" adults. Third, the segregation of mentally deficient children into separate classes allowed for their control and supervision.

However, while medical and educational professionals both 'daemonised' mentally deficient children as threats to society and continued to see them in utilitarian terms, this study

has also demonstrated that many mentally deficient children were loved and supported by their families. Indeed, the comments of Dr. Manchester to Vancouver's chief of Police after the discharge of Henry and Oscar Fraser from P.H.I, and the heartbroken letters of Angus Johnstone and François Ben, are indicative of the fact that many parents invested their mentally deficient children with the same sentimental value that, according to Zelizer, parents increasingly projected onto their 'normal' children. Moreover, the resistance of many parents to the attempts by government officials and medical and educational professionals' to enact eugenics policies further indicates the emotional attachment between parents and their mentally deficient children.

Finally, this study has demonstrated that medical and educational professionals did not have complete control over all of those individuals considered mentally deficient, or over the events that led to their admission into and withdrawal from institutions. Nor were the depictions by authorities of the role that mentally deficient individuals (both as children and adults) played in society, including their relationships with their families and communities, always correct. Despite the very real struggles mentally deficient individuals faced in what was often a hostile world, and the very negative portrait that eugenicists painted of them, they often exercised very real agency in shaping their own lives. This is not to romanticise the lives of individuals outside of institutions, but rather to point to the dangers of focussing solely on institutions and authorities when examining the history of disability in British Columbia. Indeed, the history of people with intellectual disabilities has long been trapped within the walls of institutions built in the late nineteenth and early twentieth centuries, institutions built to segregate these individuals from, and make them invisible to, 'normal' society. Although the closure of Woodlands (1996-1997) and other facilities in British Columbia has promised an end to the practice of segregating the intellectually disabled from the greater community, scholars by concentrating on institutions and medical and educational ideologies have continued to reduce the disabled to non-speaking,

supporting roles that tell us little about their lives, or the lives of their families. This has left the intellectually disabled without a voice and, more importantly, without a recognised place in the history of British Columbia. These individuals can only be given a place if historians are willing to step beyond the bounds of the institution, as this study has attempted (in a limited way) to do, and engage with the lives of the intellectually disabled and their families.

Bibliography

Primary Sources

Archival Sources

British Columbia, Provincial Secretary Correspondence 1918-1926, GR-0344, Box 1, British Columbia Archives and Record Services

British Columbia, Essondale Provincial Mental Hospital Admission Registers, GR-1754, Vol. 1 and 2, British Columbia Archives and Record Services.

British Columbia, Mental Health Services Patient Case Files 1872-1942, GR-2880, Boxes 1-30, British Columbia Archives and Record Services.

New Zealand, Seaview Register of Patients 1869-1912, CH 22/73, Archives New Zealand Te Whare Tohu Tuhituhinga o Aotearoa.

New Zealand, Sunnyside Lunatic Asylum Patient's Casebooks 1872-1892, CH 388/15 – CH388/20, Archives New Zealand Te Whare Tohu Tuhituhinga o Aotearoa.

New Zealand, Sunnyside Lunatic Asylum Registers of Admission 1854-1890, CH388/1-CH388/4, Archives New Zealand Te Whare Tohu Tuhituhinga o Aotearoa.

Government Documents and Reports

Government of the Province of British Columbia, Royal Commission of Mental Hygiene, *Report of the Royal Commission on Mental Hygiene*, Victoria: King's Printer, 1927.

_____. *Final Report of the Royal Commission on Mental Hygiene*, Victoria: King's Printer, 1928.

Howe, Samuel G. *On the Causes of Idiocy; being the supplement to a report by S.G. Howe and the other commissioners appointed by the Governor of Massachusetts to inquire into the condition of the idiots of the Commonwealth*, Chris Borthwick and Murray K. Simpson, eds., <http://www.personal.dundee.ac.uk/~mksimpso/howe.htm>

Mackellar, Charles. *The Treatment of Neglected and Delinquent Children in Great Britain, Europe, and America with Recommendations as to Amendment of Administration and Law in New South Wales*, Sydney: W.A. Gullick Government Printer, 1913.

New Zealand House of Representatives. *Appendix to the Journals of the House of Representatives of New Zealand*, Wellington: Government Printer, 1870-1930.

_____. *New Zealand Parliamentary Debates*, Vol. 7-226, Wellington: Government Printer, 1870-1930.

Newspapers

Daily Colonist, Victoria, 1870-1930

Globe and Mail, Toronto, 1870-1930

Lyttelton Times, Lyttelton, New Zealand, 1900-1910

Victoria Daily Times, Victoria, 1870-1930

Books, Journals and Articles

Anonymous. "Dugdale's The Jukes", *Atlantic Monthly*, 41, 245, March 1878, p.405.

Burdett, Henry C. *Hospitals and Asylums of the World: Their Origin, History, Construction, Administration, Management, And Legistaion; With Plans Of The Chief Medical Institutions Accurately Drawn To A Uniform Scale, In Addition To All Of Hospitals of London In The Jubilee Year Of Queen Victoria's Reign*, Vol. 1-4, London: The Scientific Press, 1891-1898.

Canadian National Committee for Mental Hygiene. "Mental Hygiene Survey of the Province of British Columbia", *Canadian Journal of Mental Hygiene*, 2, 1, 1920, pp.3-59.

Collinson, D. *A Treatise on the Law concerning Idiots, Lunatics and other persons non compos mentis*, London: R. Wilks Printer, 1812.

Down, John Langdon Haydon. "Observations on an ethnic classification of idiots", *London Hospital Reports*, iii 1866, pp. 259-262.

Dugdale, Richard. *The Jukes: A Study in Crime, Pauperism, Disease and Heredity*, New York: Putnam, 1875.

_____. "Origin of Crime in Society", *Atlantic Monthly*, 48, 288, Oct. 1881, pp.452-463.

_____. "Origin of Crime in Society", *Atlantic Monthly*, 48, 290, Dec. 1881, pp.735-738.

_____. "Origin of Crime in Society", *Atlantic Monthly*, 49, 292, Feb.1882, pp.243-251.

Eastbrook, Arthur. *The Jukes in 1915*, Washington: Carnegie Institution, 1916.

Fuller, E.W. "General Role of an Institution for Mental Deficients," in Government of British Columbia, Royal Commission on Mental Hygiene, *Final Report of the Royal Commission on Mental Hygiene*, Victoria: Charles F. Banfield, 1928, p. G11-12.

Galton, Francis. *Hereditary Talent and Character*, in Christopher D. Green, ed., *Classics in the History of Psychology*, <http://psychclassics.asu.edu/galton/talent.htm>.

Goddard, Henry H. *The Kallikak Family: a Study in Hereditary of Feeble-Mindedness*, in Christopher D. Green, ed., *Classics in the History of Psychology*, <http://psychclassics.asu.edu/Goddard/preface.htm>.

Groves, W.E. "Special Auxiliary Classes: Report Given to the Toronto Board of Education after visiting a number of Auxiliary Classes in the United States", *Canadian Journal of Mental Hygiene*, 1, 2, 1919, pp.182-187.

Halpenny, J. "One Phase of the Foreign Invasion of Canada", *Canadian Journal of Mental Hygiene*, 1, 3, 1919, pp.224-226.

Highmore, Arthur. *A Treatise on the Law of Idiocy and Lunacy; to which is subjoined an appendix, containing the practice of the court of Chancery on this subject, and some useful practical forms*, London: Butterworth, 1807.

Hincks, C. M. "The Scope and Aims of the Mental Hygiene Movement in Canada", *Canadian Journal of Mental Hygiene*, 1, 1, 1919, pp.20-29.

MacMurchy, Helen. "The Parents Plea", *Canadian Journal of Mental Hygiene*, 1, 3, 1919, p.211-212

_____. "Letter to Inspectors, Principals and Teachers", *Canadian Journal of Mental Hygiene*, 1, 3, 1919, pp.269-277.

_____. *The Almosts: A Study of the Feeble-minded*, Boston: Mifflin, 1920.

_____. *Sterilization? Birth Control?: A Book for Family Welfare and Safety*, Toronto: MacMillan, 1934.

Mundie, Gordon. "The Problem of the Mentally Defective in the Province of Quebec", *Canadian Journal of Mental Hygiene*, 1, 2, 1919, p.123-129.

Taft, Jessie. "Supervision of the Feeble-minded in the Community," *Canadian Journal of Mental Hygiene*, 1, 2, 1919, pp.164-171.

Secondary Sources

Adams, Rachel. *Sideshow U.S.A: Freaks and the American Cultural Imagination*, Chicago: Chicago University Press: 2001.

Adoph, Val. *Memories of Woodlands*, Victoria: Ministry of Social Services, Government of British Columbia, 1996.

- _____. *In the Context of Its Time: A History of Woodlands*, Victoria: Ministry of Social Services, Government of British Columbia, 1996.
- Atkinson, Dorothy, Jackson, Mark, and Walmsley, Jan, eds.** *Forgotten Lives: Exploring the History of Learning Disability*, Kidderminster: BILD Publications, 1997.
- Ballard, Keith, ed.** *Disability, Family, Whanau and Society*, Palmerston North: Dunmore Press, 1994.
- Bardsley, Stephen.** *The Functions of an Institution: The Otekaike Special School for Boys*, B.A. (Honours) Thesis, Otago University, 1991.
- Barman, Jean.** "“Oh, No! It would not be proper to discuss that with you’: Reflections on Gender and the Experience of Childhood”, *Curriculum Inquiry*, 24, 1, 1996 pp.53-67.
- Bartlett, Peter and Wright, David.** "Community care and its antecedents," in Peter. Bartlett and David. Wright, ed., *Outside the Walls of the Asylum: The History of Care in the Community, 1750-2000* London: Athlone Press, 1999, pp.1-18.
- Bayton, Douglas C.** "Disability and the Justification of Inequality in American History", in Paul K. Longmore and Lauri Umansky, ed., *The New Disability History: American Perspectives* New York: New York University Press, 2001, pp.33-57.
- Bevan-Brown, Jill.** "Intellectual Disability: A Maori Perspective", in Keith Ballard, ed., *Disability, Family, Whanau and Society*, Palmerston North: Dunmore Press, 1994, pp. 205-230.
- Brigham, Lindsay, Atkinson, Dorothy, Jackson, Mark, Rolph, Sheena, and Walmsley, Jan, ed.** *Crossing Boundaries: Change and Continuity in the History of Learning Disability*, Kidderminster: BILD Publications, 2000.
- Brockley, Janice A.** "History of Mental Retardation: An Essay Review", *History of Psychology*, 2, 1, 1999, pp. 25-36.
- Bullen, John.** "Orphans, Idiots, Lunatics, and Historians: Recent Approaches to the History of Child Welfare in Canada", *Historie Sociale/Social History*, 35, 1985, pp.133-145.
- Chakrabarty, Dipesh.** *Provincializing Europe: Postcolonial Thought and Historical Difference*, Princeton: Princeton University Press, 2000.
- Comacchio, Cynthia.** *Nations are Built of Babies: Saving Ontario's Mothers and Children 1900-1940*, Montreal: McGill-Queen's University Press, 1993.
- Cooter, Roger, ed.** *In the Name of the Child: Health and Welfare, 1880-1940*, London: Routledge, 1992.

- Copeland, Ian C.** *The making of the Backward Pupil in Education in England, 1870-1914*, London: Woburn Press, 1999.
- Covey, Herbert.** *Social Representations of People with Disabilities*, Springfield: Charles C. Thomas, 1998.
- Cunningham, Hugh.** *Children and Childhood in Western Society Since 1500*, Harrow: Longman, 1995.
- Davis, Megan.** *The Patients' World: British Columbia's Mental Health Facilities, 1910-1935*, Master of Arts Thesis: University of Waterloo, 1989.
- Digby, Anne.** "Context and Perspective" in David Wright and Anne Digby, ed., *From Idiocy to Mental Deficiency: Historical perspectives on people with learning disabilities*, London: Routledge, 1997, pp. 1-21.
- Dowbiggen, Ian.** *Keeping America Sane: Psychiatry and Eugenics in the United States and Canada, 1880-1940*, Ithaca: Cornell University Press, 1997.
- Dunae, Patrick.** "Waifs: The Fairbridge Society In British Columbia, 1931-1951", *Historie Sociale/Social History*, 42, 1988, pp. 225-250.
- Ernst, Waltraud and Harris, Bernard, ed.** *Race, Science and Medicine, 1700-1960*, London: Routledge, 1999.
- Ferguson, Philip. M.** *Abandoned to their Fate: Social Policy and Practice Toward Severely Retarded People in America, 1820-1920*, Philadelphia: Temple University Press, 1994.
- Friedberger, Mark.** "The Decision to Institutionalize: Families with exceptional children in 1900", *Journal of Family History*, 6, 4, 1981, pp. 396-406.
- Gladstone, David.** "The Changing Dynamic of Institutional Care: The Western Countries Idiots Asylum 1864-1914", in David Wright and Anne Digby, ed., *From Idiocy to Mental Deficiency: Historical perspectives on people with learning disabilities*, London: Routledge, 1997, pp.134-160.
- Gleason, Mona.** "Race, Class, and Health: School Medical Inspection and 'Healthy' Children in British Columbia, 1890-1930", *Canadian Bulletin of Medical History*, Vol. 19, 2002, pp. 95-112.
- Gleeson, B.J.** "Disability Studies: a historical materialist view", *Disability & Society*, 12, 2, 1997, pp.179-202.
- Godler, Zlata.** "Doctors and the New immigrants", *Canadian Ethnic Studies*, 9, 1977, pp. 6-17.
- Goffman, Erving.** *Asylums: Essays on the Social Situation of Mental Patients and Other Inmates*, Chicago: Anchor Books, 1961.

- Gould, Stephen J.** *The Mismeasure of Man*, Revised Edition, New York: W.W. Norton, 1996.
- Grob, Gerald N.** "Mental Retardation and Public Policy in America: A Research Agenda", *History of Education Quarterly*, 26, 2, 1986, pp. 307-313.
- Hirsh, Karen.** "Culture and Disability: The Role of Oral History", *Oral History Review*, 22, 1, 1995, pp.1-27.
- Horden, Peregrine and Smith, Richard, ed.** *The Locus of Care: Families, communities, institutions and the provision of welfare since antiquity*, London: Routledge, 1998.
- Huff, Cynthia.** "Victorian Exhibitionism and Eugenics: The Case of Francis Galton and the 1899 Crystal Palace Dog Show," *Victorian Review*, 28, 2, 2002, pp.1-19.
- Iacovetta, Franca.** "Gossip, Contest, and Power in the Making of Suburban Bad Girls: Toronto, 1945-60", *The Canadian Historical Review*, 80, 4, 1999, pp. 585-623.
- Jackson, Mark.** "Images of Deviance: Visual Representations of Mental Defectives in Twentieth Century Medical Texts", *British Journal for the History of Science*, 28, 1995, pp. 319-37.
- _____. "Changing Depictions of disease: Race, Representation and the history of 'mongolism'", in Waltraud Ernst and Bernard Harris, ed., *Race, Science and Medicine, 1700-1960*, London: Routledge, 1999, pp. 167-188.
- Kelm, Mary-Ellen.** "'The only place likely to do her any good': The Admission of Women to British Columbia's Provincial Hospital for the Insane", *BC Studies*, 96, Winter 1992-1993, pp.66-89.
- King, Richard.** *Orientalism and Religion: Post Colonial Theory, India and 'The Mystic East'*, London: Routledge, 1999.
- Kudlick, Catherine.** "Disability History: Why we need another 'Other'", *American Historical Review*, June 2003, pp.763-793.
- Lane, Sandra, Mikhail, Blanche I., Reizian, Alice, Courtright, Paul, Marx, Rani, and Dawson, Chandler R.** "Sociocultural Aspects of Blindness in an Egyptian Delta Hamlet: Visual Impairment vs. Visual Disability", *Medical Anthropology*, 15, 3, 1993, pp.245-260.
- Lederer, Susan.** "Orphans as Guinea Pigs: American Children and Medical Experiments, 1890-1930," in Roger Cooter, ed., *In the Name of the Child: Health and Welfare, 1880-1940*, London: Routledge, 1992, pp.96-123.
- Longmore, Paul K. and Umansky, Lauri., ed.** *The New Disability History: American Perspectives*, New York: New York University Press, 2001.

- Longmore, Paul K. and Umansky, Lauri.** "Disability History: From the Margins to the Mainstream", in Paul K. Longmore and Lauri Umansky, ed., *The New Disability History: American Perspectives*, New York: New York University Press, 2001, pp.1-32.
- McLaren, Angus.** *Our Own Master Race: Eugenics in Canada, 1885-1945*, Toronto: McClelland and Stewart, 1990.
- Malti-Douglas, Fedwa.** *Blindness and Autobiography: Al-Ayyam of Taha Husayn*, Princeton: Princeton University Press, 1988.
- Millar, Edgar.** "Idiocy in the nineteenth century," in German E. Barrios & Roy Porter ed., *History of Psychiatry*, London: Alpha Academic, 1996, pp.367-368.
- Miller, James.** *Shingwauk's Vision: A History of Native Residential Schools*, Toronto: University of Toronto Press, 1996.
- Mitchinson, Wendy.** *The Nature of their Bodies: Women and Their Doctors in Victorian Canada*, Toronto: University of Toronto Press, 1991.
- Moore, Andrew and Tennant, Margaret.** *Who is Responsible for the Provision of Support Services for People with Disabilities?*, Wellington: National Health Committee, 1997.
- Myers, Tamara.** "The Voluntary Delinquent: Parents, Daughters, and the Montreal Delinquents' Court in 1918," *Canadian Historical Review*, 80, No. 2, 1999, pp.242-268.
- National Film Board of Canada.** *The Sterilization of Leilani Muir*, 1996 (Video).
- Open University School of Health and Social Welfare, Social history of learning disability research group.** *The Social History Of Learning Disability In The Twentieth Century*, <http://www.open.ac.uk/shsw/Research/rphistlearndis20.html>.
- Neugebauer, Richard.** "Mental Handicap in Medieval and Early Modern England: Criteria, measurement and care", in David Wright and Anne Digby, ed., *From Idiocy to Mental Deficiency: Historical perspectives on people with learning disabilities*, London: Routledge, 1997, pp. 22-43.
- Noll, Steven.** *Feeble Minded in Our Midst: Institutions for the Mentally Retarded in the South, 1900-1940* Chapel Hill: University of North Carolina Press, 1995.
- Parr, Joy.** *Labouring Children: British Immigrant Apprentices to Canada, 1869-1924*, 2nd Ed., Toronto: University of Toronto Press, 1994.
- Pernick, Martin S.** *The Black Stork: Eugenics and the Death of "Defective" babies in American Medicine and Motion Pictures Since 1915*, New York: Oxford University Press, 1996.

- Reilly, Philip.** *The Surgical Solution: A History of Involuntary Sterilization in the United States*, Baltimore: John Hopkins University Press, 1991.
- Roberts, Barbara.** "Doctors and Deports: The Role of the Medical Profession in Canadian Deportation, 1900-1920", *Canadian Ethnic Studies*, 18, 3, 1986, pp. 17-36.
- _____. *Whence they Came: Deportation from Canada 1900-1935*, Ottawa: University of Ottawa Press, 1988.
- Rooke, Patricia and Schnell, Rodolph.** "The 'King's Children' in English Canada: A Psychohistorical study of abandonment, Rejection, and colonial response (1869-1930)", *Journal of Psychohistory*, 8, 1981, pp. 387-420.
- Rose, Sonya, Canning, Kathleen, Clark, Anne, Valverde, Mariana, and Sawyer, Marcia.** "Gender History/Women's History: Is Feminist Scholarship Losing its Critical Edge?" *Journal of Women's History*, 5, 1, 1993, pp.89-128.
- Rioux, Marcia H.** "Bending Towards Justice," in Len Barton, ed., *Disability, Politics and the Struggle for Change*, London: David Fulton Publishers, 2001.
- Ryan, Joanna.** *The Politics of Mental Handicap*, Harmondsworth: Free Association Books, 1980.
- Rymer, Russ.** *Genie: An abused child's flight from silence*, New York: HarperCollins Publishers, 1993.
- Sangster, Joan.** "'She is Hostile to Our Ways': First Nations Girls Sentenced to the Ontario Training School for Girls, 1933-1960", *Law and History Review*, 20, 1, 2002, pp.59-96.
- Sarason, Seymour and Doris, John.** *Educational Handicap, Public Policy, and Social History: A Broadened Perspective on Mental Retardation*, New York: Free Press, 1979.
- Shelley, Mary.** *Frankenstein: The Original 1818 Text*, D.L. Macdonald and Kathleen Scherf, ed., Peterborough: Broadview Press, 2001.
- Stearns, Peter.** "The New Social History: An Overview", in James Gardner & George Adams ed., *Ordinary People and Everyday Life: Perspectives on the New Social History*, Nashville: American Association for State and Local History, 1983, pp.3-21.
- Steedman, Carolyn.** "Bodies, Figures and Physiology: Margaret McMillan and the late nineteenth century remaking of working-class childhood", in Roger Cooter, ed., *In the Name of the Child: Health and Welfare, 1880-1940*, London: Routledge, 1992, pp.19-44
- Strong-Boag, Veronica.** "Contested Space: The Politics of Canadian Memory", *Journal of The Canadian Historical Association/ Revue de la Société historique du Canada*, 1994, pp.1-17.

Sutherland, Neil. *Children in English Canadian Society: Framing the Twentieth Century Consensus*, Waterloo: Wilfrid Laurier University Press, 2000.

_____. *Growing Up: Childhood in English Canadian from the Great War to the Age of Television*, Toronto, University of Toronto Press, 1997.

Suzuki, Akihito. "The Household and the Care of Lunatics in Eighteenth-Century London," in Peregrine Horden and Richard Smith, ed., *The Locus of Care: Families, communities, institutions and the provision of welfare since antiquity*, London: Routledge, 1998, pp. 153-175.

Taylor, Peter. "Denied the Power to Choose the Good: Sexuality and Mental Defect in American Medical Practice, 1850-1920", *Journal of Social History*, 10, 1977, pp. 472-489.

Tennant, Margaret. "Disability in New Zealand: An Historical Survey", *New Zealand Journal of Disability Studies*, 2, 1996, pp. 3-33.

Thomson, Gerald. "Book Review: *Memories of Woodlands and In the Context of Its Time: A History of Woodlands*", *BC Studies*, 113, 1997, pp.113-114.

_____. *Remove From Our Midst These Unfortunates: A historical into the influence of eugenics, educational efficiency as well as mental hygiene upon the Vancouver school system and its special classes, 1910-1969*, Doctoral Dissertation: University of British Columbia, 1999.

Thomson, Mathew. "Community Care and the Control of Mental Defectives in Inter-War Britain", *The Locus of Care: Families, communities, institutions and the provision of welfare since antiquity*, in Peregrine Horden and Richard Smith, ed., *The Locus of Care: Families, communities, institutions and the provision of welfare since antiquity*, London: Routledge, 1998, pp.198-218.

_____. *The Problem of Mental Deficiency: Eugenics, Democracy, and Social Policy in Britain c.1870-1959*, Oxford: Clarendon Press, 1998.

Thomson, Rosemarie G. "Seeing the Disabled: Visual Rhetorics of Disability in Popular Photography", in Paul K. Longmore & Lauri Umansky, ed., *The New Disability History: American Perspectives* New York: New York University Press, 2001, pp.335-374.

Titchkosky, Tanya. "Disability Studies: The Old and the New", *Canadian Journal of Sociology*, 25, 2000, pp. 197-224.

Trent, James. *Inventing the Feeble Mind: A History of Mental Retardation in the United States*, Berkeley: University of California Press, 1994.

Treuillot, Michel-Rolph. *Silencing the Past: Power and the Production of History*, Boston: Beacon Press, 1995.

- Üstün, T. Bedirhan, ed.** *Disability and Culture: Universalism and Diversity*, Seattle: Hogrefe & Heber 2000.
- Valverde, Mariana.** "Representing Childhood: The Multiple Fathers of the Dionne Quintuplets" in Carol Smart, ed., *Regulating Womanhood: Historical Essays on Motherhood and Sexuality*, London: Routledge, 1992, pp.119-146.
- Volpe, E. Peter.** "Is Down Syndrome a Modern Disease", *Perspectives in Biology and Medicine*, 29, 3, 1986, pp.423-436.
- Walmsley, Jan.** "Normalisation, Emancipatory Research and Inclusive Research in Learning Disability", *Disability and Society*, 16, 2, 2001, pp.187-205.
- Washbourne, Gilda.** *My Journey*, Christchurch: SISTERS, 2002.
- Wright D. & Digby, Anne, ed.** *From Idiocy to Mental Deficiency: Historical perspectives on people with learning disabilities*, London: Routledge, 1997.
- Wright, David.** "Familial Care of 'Idiot' Children in Victorian England", *The Locus of Care: Families, communities, institutions and the provision of welfare since antiquity*, in P. Horden and R. Smith, ed., *The Locus of Care: Families, communities, institutions and the provision of welfare since antiquity*, London: Routledge, 1998, pp. 176-197.
- _____. "Families' Strategies and the Institutional confinement of 'idiot' children in Victorian England", *Journal of Family History*, 23, 2, 1998, pp. 190-208.
- Zihni, Lilian S.** *The History of the Relationship between the concept and treatment of people with Down's syndrome in Britain and America from 1866-1967*, Doctoral Dissertation: University College, London, 1990.
- _____. "Sutherland's Syphilis Hypothesis of Down's Syndrome", *Journal of the History of the Neurosciences*, 4, 2, 1995, pp.133-137.
- _____. "Albert Wilmarth's Nineteenth Century Study of Down's Syndrome in America: The Worth of a Neuropathologist, Asylum Superintendent and Eugenicist", *Journal of the History of the Neurosciences*, 5, 2, 1996, pp.136-142.
- Zelizer, Viviana.** *Pricing the Priceless Child: The Changing Social Value of Children*, Princeton: Princeton University Press, 1994