

The Woodlands School, 1950-1980

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Abstract

This thesis examines the history of the custodial training school, Woodlands School. Located in New Westminster, British Columbia, Woodlands operated under various names. The institution originally opened in 1878 as the Provincial Asylum for the Insane, where it housed ‘lunatics’ and confronted mental diseases. In 1950 the facility underwent a transition to a custodial training school that focused on the care of ‘feeble-minded’ children, along with children who exhibited various physical and behavioural issues. That year its name changed to Woodlands School to better align with its new focus on special education and occupational therapy. This thesis uses patient, parent, and staff perspectives to offer unique insights into how Woodlands operated and how it is remembered. Additionally, it relies on a blend of archival materials including newspaper articles, newsletters, sessional reports, tour reports, and three texts concerning Woodlands’ history produced by former staff member, Val Adolph. First, this thesis grounds Woodlands in the context of British Columbia and Canada, then examines the factors and problems associated with transitioning the Asylum for the Insane to Woodlands as a custodial training school. Secondly, I explore Woodlands’ context through a special education lens alongside the experiences of a former resident. Thirdly, I consider how activist mothers influenced the closure of Woodlands School. Overall, the history of Woodlands is complex and multi-faceted, spanning decades and generations of different experiences, yet still has significant commonalities with other custodial training schools in Canada.

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Introduction

Asylums and mental institutions were once considered a cornerstone of mental health treatment across North America. While many people welcomed their gradual disappearance from the landscape as heralding a new era in mental health, their removal also brought with it the possible erasure of stories of those who lived - and died - in these institutions.

In 1878, after the closure of the Royal Hospital Lunatic Asylum in Victoria, British Columbia (1872-1878), a new facility, the Provincial Lunatic Asylum¹ (also referred to as the Provincial Hospital for the Insane) was built on the mainland, along the Fraser River in New Westminster.² The asylum was initially used to contain people with psychiatric conditions or diagnoses. During the 1930s the Province began moving adult psychiatric patients to another purpose-built psychiatric institution, Essondale, and left children with disabilities at the Provincial Hospital.³ In 1950 the hospital was renamed the Woodlands School, to better reflect its new function as a custodial training school. Over the next several years it was home to children with physical and mental disabilities, many deemed ‘feeble-minded’ or ‘moronic’, while also serving as a catch-all for runaways and wards of the state. The new training school was divided into boys’ and girls’ wards with staff of the corresponding gender providing care on each ward. This gendered care continued until 1964 when the nurses’ divisions were combined, partly under the belief that the children benefitted from having two heteronormative parent-like figures.⁴ This staffing decision also alleviated the strain of not having enough male nurses on the men’s wards and vice versa.

¹ In 1897 the name was changed to the Provincial Hospital for the Insane and was renamed The Woodlands School in 1950.

² Val Adolph, *In the Context of Its Time: A History of Woodlands* (Victoria: Govt. of British Columbia, Ministry of Social Services, 1996), 29.

³ Essondale, now known as Riverview Hospital, was open from 1913 to 2012 in Coquitlam, B.C. Val Adolph, *In the Context of Its Time*, 87.

⁴ Val Adolph, *In the Context of Its Time*, 95.

Residents ranged in age from infants to young adults. Most patients were admitted as children and stayed well into their 30s and 40s. Woodlands was at its highest population during 1959-1961, with 1436 residents, plus 170 who remained residents but who were on temporary leave.⁵ In 1959, 500 residents were transferred to the former tuberculosis sanatorium, Tranquille, near Kamloops to try to lessen the strain on Woodlands. Staff travelled with the residents by train. As part of the transfer some of the more severely disabled residents were transferred from Tranquille to Woodlands, which did not necessarily help to alleviate the strain on staff as the new transferred patients often required a higher level of attention and care than the residents who were transferred out.⁶

Despite its transition to a custodial training school, concerns remained about the construction and layout of the building. The ability to care for larger populations continued to reveal structural problems with the facility throughout its operation despite multiple additions and upgrades to the building and further education and specialization of the staff. For example, on days with good weather residents who were capable of walking often went outside to the airing court for exercise, while residents unable to walk were carried down three flights of stairs by staff to lie on the lawn.⁷

Over its 118 years of operation, the institution garnered a troubled reputation; after its 1996 closure, public accusations from former residents and their families began making headlines with allegations that an overwhelming amount of physical, verbal, sexual, mental and emotional abuse had occurred between staff and residents at Woodlands. In 2001, Ombudsman Dulcie McCallum conducted a formal review, called “The Need To Know”, which looked into

⁵ Val Adolph, *In the Context of Its Time*, 93.

⁶ Val Adolph, *In the Context of Its Time*, 92.

⁷ Val Adolph, *In the Context of Its Time*, 80.

allegations of systematic abuse that occurred between 1975 and 1992.⁸ McCallum concluded that overcrowding, undertrained staff, a poor layout of the wards, and a code of silence among the staff contributed to the deaths of over 3,000 young people at Woodlands.⁹

Woodlands is not unique within the history of custodial care facilities in Canada, but as these mental health institutions disappear from the Canadian landscape, as they are demolished or repurposed in an era where large-scale custodial care is no longer the norm, this study helps to consider the legacy of institutionalization for children. Alongside Indian Residential Schools, these facilities were purpose-built and designed to segregate children from their families at a time when isolation was considered critical for their rehabilitation or assimilation –and a significant number of children died in these facilities.

This thesis argues Woodlands School’s history is a complex, multi-faceted narrative that functioned within an outdated building and institutional system, and an evolving belief system surrounding institutionalization. Woodlands lies in a grey area where the experiences of residents varied greatly depending on their backgrounds and abilities, and the time period in which they lived there. While there is evidence to suggest that Woodlands was potentially a failure, its history is much more nuanced, even as the institution’s name changed so did its role within the community, and the greater context of custodial training schools in Canada.

This thesis focuses on the time frame between 1950-1980 as it contained the most significant changes in the history of the institution. 1950 was the year that the Provincial Hospital for the Insane transitioned from an asylum / hospital for mainly adults to the custodial training school, Woodlands School, focusing on the care of children with disabilities. August 1,

⁸ Dulcie McCallum, *The Need to Know: Administrative Review of Woodlands School* (Victoria: Government of British Columbia, Ministry of Children and Family Development, 2001), 10.

⁹ Dulcie McCallum, *The Need to Know*, 18.

1974 saw British Columbia's Crown Proceeding Act brought into law, which allowed citizens to sue the government for wrongdoing. This is significant because after Woodlands' closure, survivors of the institution wanted to put forth a class action lawsuit over the systematic abuse they suffered while at Woodlands. Survivors who resided at Woodlands prior to August 1st were not legally allowed to be included in the lawsuit. This decision was overturned in 2018, allowing for survivors who previously were not allowed to sue were now able to get \$10,000 in compensation for the abuse they suffered.¹⁰ Importantly, the late 1970s had served as the beginning of deinstitutionalization for Woodlands with the 1977 decision by the government of British Columbia to close all institutions in the province, which the Woodlands Parent Group had lobbied for. This time frame highlights a change in politics and beliefs about institutions in the context of the Lower Mainland in British Columbia. This thesis examines the context and time in which Woodlands became a custodial training school, while also situating it in the Canadian context, and considering the influence and inclusion of special education within these schools. Additionally, this thesis explores the role of activist parents, especially mothers, in relation to Woodlands with the creation of the Woodlands Parent Group, which played a crucial role in ultimately closing Woodlands despite societal and medical criticism, and "mother blaming" for advocacy.

Historiography

Upon its opening in 1878, the Provincial Hospital for the Insane was the largest asylum in British Columbia, which had entered confederation just seven years prior. Previously, smaller asylums had been active on Vancouver Island, often using former hospitals and jails. Over time pressure to confine people in these institutions meant that the existing facilities could no longer

¹⁰ "Woodlands' Survivors Finally Receive Compensation," Woodlands' survivors finally receive compensation, October 8, 2018, <https://news.gov.bc.ca/releases/2018HLTH0094-001952>

handle the growing populations of criminals mixed in with ‘lunatics’. Despite its significant mark on early British Columbian history there has been minimal historical scholarly writing about this institution. One notable article focusing on the asylum is Gerry Ferguson’s “Control of the Insane in British Columbia, 1849-78: Care, Cure or Confinement?” which examines the “modes of discipline and social control of the people considered insane employed in the white settler colony of British Columbia during its first thirty years.”¹¹ Ferguson examines the early asylum through a legal lens considering the beliefs on discipline and moral treatment during that time. Established during the late 19th century, the Provincial Asylum echoed the trend towards moral treatment after the concept had already swept through eastern Canada since the mid-19th century.¹²

Moral treatment emerged in the 18th century under the belief that restraining people exhibiting insanity was inhumane, and that there were other ways in which to rehabilitate patients without the use of restraints. In 1961 Essondale physician Richard G. Foulkes reflected on the therapeutic landscape at Woodlands in a Canadian Medical Association Journal article “British Columbia Mental Health Services: Historical Perspective to 1961.” Foulkes gives a brief history of mental illness in British Columbia focusing on the Provincial Asylum / Woodlands where he recognizes the implementation of moral treatment along with the advances and shortfalls of the institution over time. He portrays the history of Provincial Asylum / Woodlands as progressive, focusing on the advances in treatment and atmosphere within the institution by acknowledging the use of moral treatment as an improvement for patients. He meanwhile

¹¹ Gerry Ferguson, “Control of the Insane in British Columbia, 1849-78: Care, Cure of Confinement?” in *Regulating Lives: Historical Essays on the State, Society, the Individual, and the Law*, ed. Dorothy E. Chunn, John McLaren, and Robert J. Menzies (Vancouver: UBC Press, 2002), 63.

¹² James E. Moran, *Committed to the State Asylum: Insanity and Society in Nineteenth-Century Quebec and Ontario*, (Montreal: McGill-Queens University Press, 2000).

downplays the institutional struggles of overcrowding and understaffing.

The anti-psychiatry movement of the 1960s saw a shift in the historiography focused on psychiatric institutions away from the narratives of psychiatric professionals towards social and cultural critiques of the role of psychiatric institutions in modern society. Michel Foucault's *Madness and Civilization* was a key text in questioning the previous narratives through challenging their progressive nature. Foucault argued that, prior to the age of confinement, 'the mad' roamed more freely in Europe. Society began to regard those people as dangerous animalistic beasts unfit to be free in society, and thus they began to be chained and jailed.¹³ This process eventually led to the rise of widespread confinement. Foucault stated that, "those chained to the walls were no longer men whose minds have wandered, but beasts preyed upon by [a natural frenzy]: as if madness, at its extreme point, freed from that moral unreason."¹⁴ Foucault saw the confinement of people considered mad as a way of having explicit control over them in an asylum environment. Rarely did institutions place an emphasis on treatment, but rather focused on segregation. These places were also used to hold the poor, the disabled-bodied and the criminal. According to Foucault, the creation of the asylum created a need and space for the development of psychiatry and psychology as authorities or experts took over a landscape of disordered bodies and minds. Foucault recognized that the practices of the past contributed to "the oppression of the mad"¹⁵ in that the asylum was ultimately used as a form of social control.

Historian David Rothman and sociologist Andrew Scull built upon Foucault's arguments, and built their own critiques of the rise of the asylum. Rothman's views as a left-leaning liberal led him to focus on the use of social control throughout the Jacksonian period in America. In *The*

¹³ Michel Foucault, *Madness and Civilization; A History of Insanity in the Age of Reason* (New York: Vintage Books, 1973), 72.

¹⁴ Michel Foucault, *Madness and Civilization*, 72.

¹⁵ James E. Moran, *Committed to the State Asylum*, 7.

Discovery of the Asylum, Rothman claimed that the need to segregate and confine was practically nonexistent except in few institutions that served as places of last resort.¹⁶ In regard to Foucault's *Madness and Civilization*, Rothman recognized the strengths of Foucault's work but was ultimately critical of his theories, arguing that they lacked historical specificity and were not attached to actual events borne out through archival documentation. Without tying these ideas to specific instances in history, Rothman recognized the disconnect between theory and practice in Foucault's critique.¹⁷ Unlike Foucault, Rothman used the emergence of asylums and other places of confinement in the United States to show the shift from penitentiaries to asylums showed more discernment in the classification of citizens and their placement into various institutions.

Rothman situated the asylum and its emergence in America within a social context. From that perspective, he argued that the introduction of these different places of confinement became a way of creating stability and cohesion within a society that had abandoned traditional colonial mechanisms.¹⁸ Rothman also argued that with the creation of penitentiaries, workhouses, and asylums, American society found that some issues could be solved or eliminated through 'purpose-based institutions.'¹⁹ As many institutions failed to meet their purposes and as systemic problems such as overcrowding in these institutions became prevalent, the new system became less concerned with humanitarianism and more focused on simply housing those who were seen as deviant or did not have anything to contribute to the growth of the society.

Rothman's ideas challenge those of neo-marxist scholar Andrew Scull who chose to focus on the market economy and capitalist production and how the processes of

¹⁶ David J. Rothman, *The Discovery of the Asylum; Social Order and Disorder in the New Republic* (Boston: Little Brown, 1971), xv.

¹⁷ David J. Rothman, *The Discovery of the Asylum*, xvii.

¹⁸ David J. Rothman, *The Discovery of the Asylum*, xviii.

¹⁹ David J. Rothman, *The Discovery of the Asylum*.

industrialization and urbanization led to the rise of the asylum in Europe. Scull argues that the shift happened within society through the market economy, which further strained the socioeconomic relations between the higher- and lower-class citizens.²⁰ This allowed the upper and middle classes, who had a growing intolerance to unproductive people, to support their institutionalization. Scull states that this time is significant due to the division between “distinguishing the able-bodied from the non-able-bodied poor,” as the ability to work becomes the source of a person’s value.²¹ While the growth of industrialization created a draw to urban centres, it meant that “family members unable to contribute effectively towards their own maintenance must have constituted a serious drain on family resources” leaving rural populations very dependent on the rest of the family.²²

Medical historian, Gerald Grob, responded to this historiographical discussion with a neo-whiggish view of asylums. Grob argued that the original institutions were created in an effort to treat and improve the quality of life of those dealing with psychiatric issues and that with the creation of the asylum began a time of great progress.²³ Due to the confusing and unprecedented nature of continued social and economic developments, reformers could not predict the issues that would potentially change the effectiveness of the institution. Grob believed that the initial institutions were beneficial and would have continued to be, had issues such as overcrowding not become rampant, effectively pushing the institutions to the place where warehousing (segregating people, rather than focusing improving their health) became the norm.²⁴

²⁰ Andrew T. Scull, *Museums of Madness: The Social Organization of Insanity in Nineteenth-Century England* (New York: St. Martin’s Press, 1979), 37.

²¹ Andrew T. Scull, *Museums of Madness*, 37.

²² Andrew T. Scull, *Museums of Madness*, 34.

²³ Gerald N. Grob, *The State and the Mentally Ill: A History of Worcester State Hospital in Massachusetts, 1830-1920* (Chapel Hill: University of North Carolina, 1966).

²⁴ Gerald N. Grob, *The State and the Mentally Ill*.

Canadian historians have also weighed in on these historiographical debates, concentrating especially on a close look inside key institutions. Geoffrey Reaume's *Remembrance of Patients Past* focuses on the patient's perspective at the Toronto Hospital for the Insane during 1870-1940. Reaume's work offers a unique perspective in his analysis partly because of his personal history with schizophrenia and the subsequent hospitalization for it, which helps to inform his approach to the material.²⁵ Reaume uses materials from patient records like administrative correspondence along with letters written by patients, along with clinical records and charts. These sources help Reaume to "present inmates in mental institutions as individual human beings who deserve to be understood on their own terms as people, rather than labels, free from the clutter of medical terminology."²⁶ This approach allows for insight into the lives and experiences of patients, which helps to humanize them rather than seeing them solely as a diagnosis or a statistic. Additionally, his patient-centred approach stems from his recognition of the lack of patient perspectives in the historical and psychiatric discourse.²⁷

Another important text, James E. Moran's *Committed to the State Asylum: Insanity and in Nineteenth-Century Quebec and Ontario*, compared experiences in Ontario and Quebec. Moran examines the relationship between insanity, society and the asylum in nineteenth-century central Canada. Shifting the focus to the prairies, historians Erika Dyck and Alex Deighton have examined the changes in psychiatric care in Canada through the example of Saskatchewan's Weyburn Mental Hospital. *Managing Madness* examines the complex history of Weyburn hospital and its different stages and how it functioned within the greater context of institutionalization and deinstitutionalization. Claudia Malacrida's *A Special Hell* focuses on

²⁵ Geoffrey Reaume, *Remembrance of Patients Past: Patient Life at the Toronto Hospital for the Insane, 1870-1940* (Toronto: University of Toronto Press, 2009).

²⁶ Geoffrey Reaume, *Remembrance of Patients Past*, 5.

²⁷ Geoffrey Reaume, *Remembrance of Patients Past*.

Alberta's Michener Centre, formerly the Provincial Training School, which was a custodial training school for children considered mentally defective or feeble-minded. Additionally, Erika Dyck's *Facing Eugenics*, the first scholarly book to look at patient perspectives at Michener, provides insights about the history of eugenics and reproductive rights in Canada. The Michener Centre shared many commonalities with Woodlands and serves as a reference point in the historiography of the institutionalization of children in Canada. These Canadian examples look closely at specific institutions to move beyond direct questions about social control, and pay greater attention to the perspectives of patients confined to these facilities.

In addition to the historiography based around institutions and asylums, the inclusion of special education has helped to demonstrate another feature of institutionalization, and another sub-field within the overarching study of psychiatric institutionalization. Particularly important is the work of Mona Gleason, a historian of education, who has extensively examined children and education in postwar Canada. Her book *Normalizing the Ideal* explores the psychology of what is considered a normal child in the early twentieth century and the social and political factors that contributed to a system of segregated education.

Building off of Mona Gleason's work is Jason Ellis' *A Class By Themselves?* which traces the origins of special education in Toronto. Also, he explores the purpose of different special education facilities, while considering their changing purposes, the backgrounds of the children, and the barriers faced by children with disabilities to obtain education.²⁸

As there is little historical writing about Woodlands School, this thesis folds in multiple perspectives through patient-centered and parent-centered approaches. With these approaches combined with critical analysis of the physical institution, particularly the political and social

²⁸ Jason Ellis. *A Class by Themselves? The Origins of Special Education in Toronto and Beyond* (Toronto: University of Toronto Press, 2019).

issues that plagued it. This thesis adds to the Woodlands School historiography, but also the greater discourse on institutions and custodial training schools in Canada, specifically Michener Centre and Huronia Regional Centre which have a shared complex history involving the mistreatment of residents.

Additionally, this thesis' contribution includes a unique perspective with the Woodlands Parent Group. This added perspective acknowledges and examines the role of parents in seeking and maintaining treatment for their children with the underlying goal of deinstitutionalization. This ties into Jessa Chupik and David Wright's work exploring how parents sought care for their children with disabilities prior to making the choice to admit them to the Orillia Asylum.²⁹ The inclusion of Woodlands Parent Group offers a greater depth of knowledge surrounding parent activism within the institutional community while in conversation with the patient and institution perspective.

Methodology

Situating Woodlands within the provincial and national context, this thesis draws on a variety of primary sources created by staff and parents associated with Woodlands. Former staff member Val Adolph's contributions to documenting the history of Woodlands are crucial in the analysis of the institution from the perspective of staff members. By reading them against the grain I considered the language being used, what is being implied, and what may have been left out. Often the narratives of the patients and details concerning their care are not addressed in staff reflections. Staff perspectives are also revealed through sessional documents, Mental Health Services annual reports, which included summaries of events and accomplishments over the years, often broken down by institution and department. These reports helped determine how the

²⁹ Jessa Chupik and David Wright, "Treating the 'Idiot' Child in Early 20th-Century Ontario," *Disability & Society* 21, no. 1 (2006): 77-90.

institution identified priorities when it came to care and distribution of resources.

The autobiography *Living with Labels and Lies*, written by former Woodlands resident Carol Dauphinais, serves as the focal point of the second chapter of this thesis. It was important when approaching this text to contextualize Dauphinais' writing within the time period she was writing it, but also the period in her life when she was writing it. She wrote her book decades after being in Woodlands, giving her time to reflect on her experiences. Although Dauphinais' writings are in many ways anecdotal, they represent an important patient perspective that is often missing from the official archival records.

Alternatively, Ombudsman Dulcie McCallum's administrative review *The Need to Know* reported on her investigation for instances of systematic abuse through reading patient records between 1975 and 1992. Her report identified systematic abuse and made recommendations to the government for how to proceed under these charges. A document like *The Need to Know* gives an alternative view of the institution. While specific patients were not named, this document highlights issues within the institution and discusses the factors which contributed to systemic forms of abuse.

The University of British Columbia's archive contains the Jackie Maniago Fonds. These fond documents the history of Woodlands Parent Group. As one of the founders of the Parent Group, Maniago donated materials from their early meetings in the 1970s, including newsletters and resources concerning the class action lawsuit started by Woodlands survivors. The extensive collection contains correspondence with Woodlands, the BC provincial government, along with newsletters, training guides, handwritten notes from meetings, and other texts concerning the advocacy and goal of closing the institution. These documents, particularly their reports on tours of Woodlands taken by parents, offers an alternative perspective into the practices and conditions

within the institution from that of concerned parents.

By using a variety of different sources, written from different perspectives in different time periods, a more complicated history of Woodlands emerges from the view of administrators, staff, patients and parents. This thesis helps to fill in gaps in understanding Woodlands and its significance in B.C. history. In particular, the voices that Adolph brings out in *Memories* offer a very different perspective than Carol Dauphinais remembers from her time at Woodlands. This comparison of voices with the addition of scholarly discourse contribute to a more nuanced analysis of Woodlands as a custodial training school in a British Columbian and Canadian context.

This thesis is divided into three thematic chapters. Chapter one focuses on Woodlands' transition from an asylum / hospital for the insane to a custodial training school. It traces the origin of the facility and its transition from jail to asylum then ultimately focuses on the years around its transition to the Woodlands training school. It also presents the complexities in planning and in the investing of resources on the part of the government of the day – and the failure of their successors to mitigate against these – which had a cumulative and devastating effect on the asylum that would later become Woodlands. By comparing Woodlands to other Canadian training schools, this chapter considers how Woodlands fits into the system of custodial schools in Canada.

Chapter two explores how institutions are remembered, partly through the autobiographical experiences of former residents, including Carol Dauphinais, and how the institution is represented in archival materials. Additionally, it considers the use of 'code breaking', having those who are familiar with specific terminology, to define and give context of the language in order for others to interpret archival material and the role of these documents

within the institution.

It explores the use of special education in custodial training schools and the theory and common beliefs about children with disabilities at the time. Through Claudia Malacrida's definitions of "ordinary" and "extraordinary" violence within the institution, the chapter compares Malacrida's analysis of Michener Centre examples with similar occurrences at Woodlands.

Chapter three focuses on the experiences of the activist mother, particularly Jo Dickey whose son Drew lived at Woodlands. Dickey helped to found the Woodlands Parent Group, which was at the centre of the lobbying efforts to close institutions in British Columbia in favour of community-based services. This chapter explores the influence of a scathing lecture given by visiting professor and expert on mental retardation, Gunnar Dybwad following a tour of Woodlands. Primarily, the chapter centres around the Woodlands Parent Group, specifically the mothers. It looks at the role of "mother blaming" in the context of mothers who have children with disabilities, and the "institutional dilemma" they faced when their child was diagnosed. It also considers the tension felt between "community parents" (those who have children in institutions, but would prefer them being in a community-based setting) and "institution parents" (those who have children in institutions, and do not believe that community-based services is a viable option) and their common goal of getting consistent and proper care for their children.

While it may have been established with the best of intentions, the Provincial Hospital for the Insane and its successor did not bear the fruit of these good intentions, but rather due to the lack of investment in improving conditions, maintaining staffing, and establishing a future path forward for the institution led to the real tragedy, that of its nearly forgotten, but still tragic legacy.

Chapter One

“Looks like a copy of some old-fashioned prison for the incarceration of criminals”:

The failure of the Provincial Asylum and the establishment of The Woodlands School

In 1950, The Woodlands School transitioned from a provincial asylum to a custodial training school that provided basic education and vocational training for people with mental and physical disabilities.¹ The school, located a short distance from the Fraser River in New Westminster, served as home for thousands of patients during its time of operation. Readily seen from the Pattullo Bridge, Woodlands’ centre block rose above the rest of the institution, the stark grey imposing structure towering against the backdrop of the North Shore Mountains. Built in the 1870s, it fit with the traditional asylum layout consisting of a large main section with wings added on as its population increased. One of its most notable features were its black-barred windows, set too high for adults to see through – a feature that was likely even more forbidding to its child residents when the asylum transitioned to a custodial training school.

In its new guise, Woodlands remained a government-run facility, its purpose now revised to serve as a place to care for children that needed specialized care and whose families, if they had families, did not have the resources to care for them in their homes or to live independently in the community.² Due to its origins as an asylum, Woodlands was not designed to house children, as it was an adult-focused institution with limited functions centering around the treatment of ‘lunatics’ and ‘deviants’. From its beginnings, which originated during a time of deep political rivalry between New Westminster and Victoria, the proposed institution was underfunded with corners being cut in order to get the institution built and functional in a short

¹ Val Adolph, *In the Context of Its Time: A History of Woodlands* (Victoria: Govt. of British Columbia, Ministry of Social Services, 1996), v.

² Val Adolph, *In the Context of Its Time*, v.

period of time.³

While Woodlands' story is one of repurposing to fit the needs of the political and social environment, other institutions were springing up across Canada; unlike Woodlands, however, these were built with the express purpose of catering to the needs of children. This repurposing of Woodlands occurred after the Second World War in an atmosphere of economic conservatism, with the government of the day wary of a possible post-war recession as had occurred after World War I.

In order to understand the significance of the transition from the Provincial Hospital for the Insane to Woodlands School it is necessary to contextualize the institution within the political and economic history of early British Columbia. In the mid to late 1800s the use of jails, or gaols as was the term used in this period, served as places to confine 'deviants', typically criminal in nature and 'lunatics'⁴ when necessary. On Vancouver Island, the Victoria Gaol was used to confine those deemed deviants in order to maintain public order in the face of the booming population.⁵ Despite multiple inmates in the jail who appeared to be suffering from some form of madness, no specific treatment was given to them beyond the basic medical treatment that all men received within the jail.⁶

One of the few histories that focuses on Woodlands School was written by a former staff member. Val Adolph's *In the Context of its Time: A History of Woodlands* discusses the pre-confederation political conflicts between Victoria and New Westminster as they pertained to

³ Val Adolph, *In the Context of Its Time*, 24.

⁴ Lunatic was the umbrella term for someone that ranged from a criminal to someone who appeared to be suffering from a form of madness.

⁵ Gerry Ferguson, "Control of the Insane in British Columbia, 1849-78: Care, Cure of Confinement?" in *Regulating Lives: Historical Essays on the State, Society, the Individual, and the Law*, ed. Dorothy E. Chunn, John McLaren, and Robert J. Menzies (Vancouver: UBC Press, 2002), 74.

⁶ Val Adolph, *In the Context of Its Time*, 11.

contests over which place would establish jails and hospitals. The latter half of Adolph's history of Woodlands focuses on the structural and internal problems leading up to the transition from asylum to school. She traced the roots of Woodlands back to the Fraser River Gold Rush⁷ when the only option for treating either criminals or so-called 'lunatics' was to place them in jails. Smaller facilities that predated large-scale asylums had people living in deplorable conditions, while these spaces remained understaffed and overcrowded.⁸

Adolph, as the former head of the Woodlands and Riverview Volunteer Association, had a personal connection to both institutions, which gave her a vested interest in their portrayal. Much of the historical documentation of the Provincial Lunatic Asylum in British Columbia was completed by Adolph after the closure of Woodlands School in 1996. Her personal connection adds another layer to her recounting of Woodlands' history as she was familiar with institution, staff, and residents. Because Adolph's books are the main source of history for Woodlands there are no other perspectives to confirm or critique the accuracy. She does point to at times various archival sources, mostly newspapers, as evidence for her narrative, especially during the period prior to the transition to Woodlands. That being said, the research and understanding of the institution is limited to one perspective which makes obtaining a further well-rounded perspective on the institution difficult.

Adolph reflected on the political struggles that plagued the settling of British Columbia and the back and forth within the province over the placement of the capital infrastructure, including the provincial asylum and penitentiary. Her criticism of the provincial government concentrates on the lack of foresight with these significant projects. Additionally, she framed the

⁷ The Fraser River Gold Rush started in 1858 and drew men to the southwest of British Columbia from as far away as California.

⁸ Val Adolph, *In the Context of Its Time*, 16.

responsibility of running these institutions as heavily dependent on the medical superintendent, who overlooked or failed to recognize the chronic issues that plagued asylums all over North America such as overcrowding and poor access to proper food, water, and drainage.⁹ She notes that both Victoria's and New Westminster's jails suffered from extreme overcrowding and deplorable conditions, referencing an article in the *British Columbian* concerning the New Westminster Jail that described the jail cells as "entirely too small, ill ventilated and an offensive effluvia arising from beneath them—the result of no proper system of drainage."¹⁰ Captain C.J. Pritchard, who served as the jail keeper for many years, attempted to maintain fair conditions within the jail, but relied on restraining lunatics for the safety of themselves and everyone around them.¹¹ During those times the focus of the jail became maintaining control over the prisoners and dealing with the constant overcrowding while suffering under the handicaps of having minimal staff and training.¹²

Ultimately New Westminster became the chosen site for the provincial penitentiary and asylum. Two new policies, the 1872 Lunacy Jurisdiction Act¹³ and the 1873 Insane Asylum Act,¹⁴ provided the legal framework for a system for committing patients or inmates to these institutions.¹⁵ According to Adolph, both facilities suffered from multiple issues stemming from a lack of foresight – poor initial planning further complicated by a lack of control on the part of Victoria-based officials who were overseeing the construction of an institution in New

⁹ Adolph, *In the Context of its Time*, 45.

¹⁰ Adolph, *In the Context of its Time*, 11.

¹¹ Adolph, *In the Context of its Time*, 5.

¹² Phillipe Pinel (1745-1826) was a French physician who pioneered and advocated for the unchaining of the insane and the use of moral treatment, treating patients in a humane manner without the use of restraints.

¹³ The 1872 Lunacy Jurisdiction Act allowed judges of the Supreme Court of Canada to appoint guardians and committees to step into a role of power for those not of sound mind.

¹⁴ The 1873 Insane Asylum Act allowed for 'lunatics' to be involuntarily committed to an asylum if they were examined by two doctors, in the presence of each other and were in agreement on the condition of the patient

¹⁵ Adolph, *In the Context of its Time*, 18.

Westminster.¹⁶ Adolph explained that Victoria was in charge of the planning of the asylum with only \$15,000 being allotted to the construction; scarcely a third of what contractors estimated the cost would be to build even an inexpensive asylum.¹⁷ Victoria's newspaper the *Colonist* reported that the new building would only hold approximately 24 patients, asserting flatly that "[the government] would either have to build two lunatic asylums or set one half of the lunatics at large" in order to meet the needs of the growing number of people in need of care.¹⁸

According to American historian David J. Rothman in *The Discovery of the Asylum*, despite the changing ideas about confinement in Europe, and despite many superintendents taking trips to asylums abroad, it had no effect on the design or operation of their North American counterparts.¹⁹ Early European asylums – that is, circa the early 1800s – were often repurposed from monasteries and almshouses, which meant the layout and architecture was designed for a purpose other than a mental hospital; as a result these places were not necessarily conducive to healing the mind or rehabilitating pathological behaviour. American administrators had a unique opportunity to have control over the architecture of their asylums, building them to their specifications with the treatment and care of patients in mind. This left an opportunity to implement forms of moral architecture and moral treatment in their design and placement.²⁰ This could be seen, for example, in the placement of asylums among picturesque gardens away from the busyness of the city. The architecture tended to have more windows and natural lighting – a significant departure from the dark, dungeon-like atmosphere of a jail or penitentiary. This administrative recognition of the asylum's environment as a contributing factor in a patient's

¹⁶ Victoria is located on the southern end of Vancouver Island, approximately 115km away from New Westminster.

¹⁷ Adolph, *In the Context of its Time*, 24.

¹⁸ Adolph, *In the Context of its Time*, 25.

¹⁹ David J. Rothman, *The Discovery of the Asylum*, (New York: Aldine de Gruyter, 2002), 135.

²⁰ Rothman, *The Discovery of the Asylum*, 135.

rehabilitation helped further physicians' interest in creating an ideal physical environment within the asylum.²¹

The issues cropping up in British Columbia echoed those of other, Central Canadian institutions, including Toronto's Provincial Lunatic Asylum which opened in 1850. Historian James Moran, in *Committed to the Asylum*, states that despite the strategic location, access to water and panoramic view (all which were considered valuable features for aiding patients in their recovery), there were continued problems maintaining proper air and water quality on the site, as well as poor drainage – a cause for concern given the contemporaneous adoption of modern germ theory.²² Much of the early maintenance and work done on asylums was done by able-bodied patients, working under the guidance and supervision of staff. This is significant for two reasons: free patient labour was considered acceptable as it was presented as work therapy, creating routine and purposeful contributions by patients, but also it was responsible for, in many cases, the expansion of buildings and the upkeep of farmland and the hospital's food supply. The use of patients for labour was meant to get them into a productive routine, one that would be able to be kept up outside of the asylum, while also clearing their mind from their mental troubles and focusing their attention at the task at hand, typically physical labour.²³

This can also be seen in Blaine Wickham's comparative study of Western Washington Hospital and Saskatchewan Provincial Mental Hospital in North Battleford. Wickham argues, in relation to Western Washington Hospital, that decisions based on the development of the asylum tended to be made by the politicians and officials due to their financial influence and control.

²¹ Norbert Finzsch and Jütte Robert, *Institutions of Confinement: Hospitals, Asylums, and Prisons in Western Europe and North America, 1500-1950*, (Cambridge: Cambridge University Press, 2003), 130.

²² James Moran, *Committed to the State Asylum: Insanity and Society in Nineteenth-Century Quebec and Ontario*, (Montreal: McGill-Queens University Press, 2000), 85.

²³ Geoffrey Reaume, "Patients at Work: Insane Asylum Inmates' Labour in Ontario, 1841-1900," in *Mental Health and Canadian Society*, ed. James E. Moran and David Wright (Montreal & Kingston: McGill-Queen's University Press, 2006), 70.

This immediately affected the land where the hospital was to be built and the accessibility to water and other necessities.²⁴ These decisions typically were not beneficial for the asylum but rather created further issues down the line that disrupted the ability for the asylum to be operated as originally intended.

In New Westminster the main issues revolved around continual bad weather that hampered the brick construction of the building and resulted in the plans for the asylum being reduced in size. Other shortcuts were taken with the lumber, placement of water pipes and even chimneys, which rarely aligned with their designations on the blueprints. According to the community, the asylum “look[ed] like a copy of some old-fashioned prison for the incarceration of criminals” which could technically be seen in the form of the new penitentiary just a short distance from the construction of the asylum.²⁵ This was not an isolated case with New Westminster as Geoffrey Reaume and James E. Moran expressed similar concerns with the facilities in Ontario having structural failings. Moran, for example, found that issues with the drainage at the Toronto Asylum resulted in the spread of cholera, significantly disrupting its operations.²⁶ In this case, improper engineering and planning demonstrated how poor planning made asylums the opposite of the tranquil places of rehabilitation that they were initially intended to be. Additionally, it showed an unwillingness to invest the necessary social and economic resources into the initial planning of these asylums.

Both the Provincial Hospital for the Insane and the renamed Woodlands displayed many similarities to what sociologist and critic Erving Goffman described as a ‘total institution’. In the mid-1950s Canadian-born sociologist Erving Goffman observed patients at St. Elizabeths

²⁴ Blaine Wickham, “Into the Void: A Crossborder Comparison of the Mental Asylum on the American and Canadian Frontier” (PhD diss., University of Saskatchewan, 2016), 40.

²⁵ Adolph, *In the Context of its Time*, 26.

²⁶ James E. Moran, *Committed to the State Asylum*, 85.

Hospital in Washington, D.C. which resulted in his book *Asylums*.²⁷ While Woodlands was not a completely closed institution, it did incorporate to some degree the four main social aspects that Goffman uses to describe a total institution: batch living, binary management, the inmate role, and the institutional perspective.²⁸ According to Goffman the total institution is “a place of residence and work where a large number of like-situated individuals, cut off from the wider society for an appreciable period of time, together lead an enclosed, formally administered round of life.”²⁹ Woodlands’ purpose was to provide a safe place for children with disabilities to be cared for and receive occupational therapy and an academic education. Woodlands pushes against Goffman’s total institution as residents were given autonomy at times, depending on their abilities. For instance, in the case of former resident Carol Dauphinais, as a teenager in Woodlands she partook in helping staff take care of younger children rather than going to educational classes or helping with sewing.³⁰ While Dauphinais’ case is complex, her safety and wellbeing factored largely into her choice to help staff. She realized early on that if she was helpful to staff she would be less likely to be on the receiving end of abuse. Also, she saw herself as ally to the children and contributed to keeping them safe from the possibility of abuse.³¹

Woodlands did not overtly try to change the identity of residents but rather pushed them to conform through strict rules and schedules, and behaviour modification. Ability and age factored into the level of care and freedom given to residents. Woodlands did at times have residents go on day trips or leaves for weekends with family, but for the most part they encouraged family to limit their interaction with the resident. It was believed that residents

²⁷ St. Elizabeth’s Hospital was a federal psychiatric hospital in Washington D.C. that housed between 7000 and 8000 patients during its peak in the 1950s.

²⁸ Erving Goffman, *Asylums: Essays on the Social Situation of Mental Patients and Other Inmates* (New York: Anchor Books, 1961), 4.

²⁹ Erving Goffman, *Asylums*, xiii.

³⁰ Carol Dauphinais, *Living with Labels and Lies: A Life Story* (Vancouver: Coast Foundation Society, 2001), 41.

³¹ Carol Dauphinais, *Living with Labels and Lies*, 41.

would adjust to the institution and the environment better if they were not continually reminded of their family and home. Arguably, the penitentiary next to Woodlands functioned more in the fashion of a total institution system, simply because of its closed system with inmates. The fact that Woodlands focused on children raises concern about whether a total institution environment was overall beneficial for its charges.

The perceptions of the purposes of institutions and the configurations within their walls have been debated throughout the institutional historiography. Sociologist Andrew Scull regarded the rise of the asylum as a response to a shift to a capitalist economy during the industrial revolution.³² Rothman described asylums, penitentiaries and other state run institutions as tools for nation building through the construction of institutions to provide rehabilitation for criminals, the insane, and the idle.³³ These institutions served as a form of social control by classification and segregation in order to benefit the people outside – and also, in theory, those inside – their walls.

Famously, madness reformers like French physician Philippe Pinel had risen to prominence for recognizing lunacy as a form of human suffering, an experience that required sympathy and humanitarianism. Pinel became significant for unchaining people who had been physically restrained due to lunacy, and Pinel emerged as a hero-figure for liberating lunatics through moral and humane treatment. He was not alone. The English Quaker reformer, Samuel Tuke,³⁴ also ushered in similar humanitarian reforms, though he did so under the guise of Christian care principles, as opposed to a medicalized view of insanity.³⁵

³² Andrew T. Scull, *Museums of Madness: The Social Organization of Insanity in Nineteenth-Century England* (Harmondsworth: Penguin, 1982), 36.

³³ David J. Rothman, *The Discovery of the Asylum* (New York: Aldine de Gruyter, 2002), 82.

³⁴ Samuel Tuke was the grandson of William Tuke who founded the York Retreat that served as a place to treat mental illness.

³⁵ Michel Foucault, *Madness and Civilization: A History of Insanity in the Age of Reason* (New York: Vintage Books, 1988), 244.

These famous 19th century reformers were criticized by French philosopher Michel Foucault, who argued that the liberation from restraints was merely replaced by a moral imprisonment. In Foucault's *Madness and Civilization*, Foucault examines the birth of the asylum with a sharp focus on the practices of Tuke and Pinel. Foucault argues that "the absence of constraint in the nineteenth-century asylum is not unreason liberated, but madness long since mastered."³⁶ Tuke's Retreat used the influence of the Quakers to provide a place for individuals to debate with themselves and their surroundings without the external pressure restraints. That being said, despite the lack of physical restraints, the Retreat had a significant presence of fear within it. Foucault argued that "Tuke created an asylum where he substituted for the free terror of madness the stifling anguish of responsibility; fear no longer reigned on the other side of the prison gates, it now raged under the seals of conscience."³⁷

Similar to Rothman's observations on Jacksonian America asylum, responsibility – in this case – primarily associated with work and building was a core focus within institutions. The Retreat shifted from restraints to responsibility, with patients now having duties around the asylum and a purpose which tied into the Quaker's need to please God through prosperity.³⁸ Responsibility to the Retreat and to themselves as patients / residents fuelled their willingness to comply with a new set of rules and order. The purpose of the retreat boiled down to "religious segregation for the purpose of moral purification."³⁹ Foucault believed that the use of work in the asylum was a way to make patients engage with responsibilities as a form of self-restraint, making outer restraints unnecessary due to the ingrained need to avoid failure.⁴⁰

³⁶ Foucault, *Madness and Civilization*, 252.

³⁷ Foucault, *Madness and Civilization*, 247.

³⁸ Foucault, *Madness and Civilization*, 247.

³⁹ Foucault, *Madness and Civilization*, 259.

⁴⁰ Foucault, *Madness and Civilization*, 248.

Surveillance played a crucial role within the institution. For residents, the architecture of the building's layout provided opportunities for abuse through "poor sight lines, inadequate opportunities for observation of residents and frequent contacts between clients and staff behind closed doors in bathrooms and bedrooms that prevented visual scrutiny by supervisors or other parties."⁴¹ Due to understaffing it was difficult for administration to ensure all staff were providing adequate and proper care to residents. Additionally, a code of silence was established within the staff that prevented instances of abuse being reported. These factors, along with the confining nature of institutions created a "coercive, controlling and sterile environment" that was not beneficial to adults, let alone children.⁴²

Philippe Pinel's approach, according to Foucault, relied on the use of morality and learned responsibility as the core features of rehabilitation in the asylum. Pinel's approach differed from that of Tuke's Retreat, by eliminating the influence of the outside world and using techniques such as silence, recognition by mirrors, and perpetual judgment to create an environment where moral synthesis could occur.⁴³ Still, neither Pinel nor Tuke associated madness with a need for medical assistance, but rather viewed it as a lapse in morality and responsibility. It was only after the further establishment of asylums that medical knowledge began to recognize and to diagnose madness as not simply a transgression or immoral, but an actual medical disorder.⁴⁴

As the beliefs of the 18th and 19th century reformers shifted away from the physical restraining of patients it was replaced by the development of the asylum which served as a time

⁴¹ Dulcie McCallum, *The Need to Know: Administrative Review of Woodlands School* (Victoria: Government of British Columbia, Ministry of Children and Family Development, 2001), 17.

⁴² Dulcie McCallum, *The Need to Know*, 17.

⁴³ Foucault, *Madness and Civilization*, 259.

⁴⁴ Foucault, *Madness and Civilization*, 276.

of confinement and segregation. With institutions like Essondale and Woodlands in British Columbia, the segregation of psychiatric patients and ‘mental defectives’ allowed for a level of social control in which the community and the province at large separated people from the community on suspicion of deviant, pathological, or criminal behaviour. Through those actions the province controlled the movement of the population through regulations and policies, which became even more influential as the Provincial Hospital for the Insane transitioned to Woodlands School.

On the cusp of the Great Depression, the Provincial Hospital for the Insane (PHI) in British Columbia began a slow progression towards the inclusion of therapies not solely for the treatment of ‘lunatics’. During this time an occupational therapy program building was constructed. The hospital’s superintendent at the time, Dr. Steeves, was adamant in advocating for the hospital to become an institution for the feeble-minded, separate from the insane, in which specialized treatment could be provided.⁴⁵⁴⁶ Essondale completed a women’s building, further easing the overcrowding issues that long plagued the hospital by syphoning women into another separate ward. Along with the transfer of women to Essondale, a number of feeble-minded patients were moved to the PHI which still had the hospital at lower than capacity.⁴⁷ The addition of new buildings at both hospitals saw the beginning of the reorganization of patients.

The economic downturn of the depression contributed to an increase in admissions at PHI. According to Adolph, parents with children with disabilities or any behavioural issue turned to the PHI to take in their children as they were becoming a burden that they could no longer

⁴⁵ Adolph, *In the Context of its Time*, 71.

⁴⁶ Some of the terminology used during this time in Canada used to describe people with intellectual disabilities were ‘feeble-minded’, ‘idiots’, and ‘morons’.

⁴⁷ Adolph, *In the Context of its Time*, 72.

afford to feed or provide care for like they once could.⁴⁸ The admissions process at Essondale meant that patients were assessed and then moved to appropriate psychiatric wards in Essondale or at the PHI. Because of the ongoing overcrowding and influx of people, the assessment of patients was quick and not as thorough as doctors and staff would have preferred.⁴⁹ Any child that came to admissions with a physical, mental, or behavioural problem was sent directly to PHI, which was gaining the reputation of being the solution for “the children that nobody else wanted.”⁵⁰

This reorganizing of populations demonstrates a change in not only the emphasis on separation of children and adults, but also the need for specialized care for both populations. Essondale took on the role of a psychiatric hospital relieving the pressure formerly placed on the PHI to treat adults with mental conditions while also dealing with children. This streamlined system, while initially rocky with the assessment of patients, allowed for Essondale to be the main psychiatric care facility in the Lower Mainland. It also provided access to Colony Farms, located a relatively short distance from Essondale in Coquitlam. Colony Farms was a large plot of government agricultural land used to grow food for Essondale and Woodlands.⁵¹ Colony Farms was used for therapeutic occupation, work therapy, for able-bodied and capable patients as much as earlier asylums saw the potential for rehabilitation. The use of physical work benefited the patients by providing stability through a daily routine, allowing them to focus on a specific task, all which would benefit them physically and through the acquisition of skills and discipline necessary for potential work outside of the asylum environment should they someday

⁴⁸ Adolph, *In the Context of its Time*, 77.

⁴⁹ Adolph, *In the Context of its Time*, 75.

⁵⁰ Adolph, *In the Context of its Time*, 76.

⁵¹ Colony Farms closed in 1983 and became a regional park in 1995. In 1997 the Forensic Psychiatric Hospital was opened to provide care for those who committed criminal acts but were found not guilty due to criminal insanity.

be released.

The increased number of children being admitted to the PHI put further pressure on the hospital to take pediatric patients, specifically infants that parents could no longer provide full-time care for due to their increasing needs as a result of their disability.⁵² Prior to this the demographics skewed towards children and young adults, as the hospital was not equipped to care for babies, especially ones that needed specific specialized care. (The role of the parents in the institutionalization of their children will further be addressed in the third chapter of this thesis.) Adolph suggested that the number of children with disabilities admitted to the hospital increased as taking care of and providing for able-bodied children was difficult, and the added pressure of caring for a disabled child was an extra burden on the family that many could not financially handle – a burden only exacerbated by the Great Depression of the 1930s.⁵³ This time period shows the changing demographics of children being admitted to the hospital was strongly influenced by the economic and social climate.

After the Second World War, the hospital took on a new purpose as a training school. The war had put a further strain on staffing levels with many of the male attendants and doctors choosing to go to war. Previously, the hospital was able to be more selective with the nurses they accepted to work at the hospital, specifically with them being unwed, which was important because they were required to live in the nurses' lodge down the street from the hospital. Around the time when the hospital transitioned to the school, the administration began accepting married women as staff members, no longer requiring nurses to live in the lodge under the supervision of the head matron. This was a change in the gender-based rules placed upon staff, coinciding with more women choosing to pursue work and education outside of the home – building on the

⁵² Adolph, *In the Context of its Time*, 77.

⁵³ Adolph, *In the Context of its Time*, 77.

wartime need for women to fill roles left empty in the workforce.

The hiring of Hazel Davy as the first qualified teacher for the school was a significant milestone in the incorporation of basic education into Woodlands.⁵⁴ Previously a psychiatric nurse, Davy was hired to teach students reading and math. Her work started with twenty students, which would later increase with the subsequent development from hospital to custodial training school. With the institution's name change there were also physical changes with students who were capable, going to structured classes and the implementation of stricter routines than had previously occurred.

General occupational therapy had been slowly implemented years before, but the addition of Jack Lyness as recreational therapist meant a gradual shift for some patients⁵⁵ away from the solely work-focused labour / work therapy toward activities like dances, bingo, swimming, badminton, tennis, and golf.⁵⁶ While there were more recreational activities happening the training skills developed through occupational therapy were more significant. The training was segregated by gender, with girls and boys learning different skills. According to the 1951 Mental Health Services annual report the focus of the therapy was to develop the skills of residents gradually, recognizing what they were capable of mentally and physically accomplishing at the time.⁵⁷ With the changing demographics and purpose, the institution no longer had the same able-bodied population to take care of the grounds and maintenance through work therapy, therefore there was a greater stress on the staff to keep patients occupied but also to maintain the institution.

⁵⁴ Adolph, *In the Context of its Time*, 84.

⁵⁵ In the late 1960s it was decided to refer to people living at Woodlands as 'residents' instead of a mix of terms also including 'patients' and 'pupils'.

⁵⁶ Adolph, *In the Context of its Time*, 84.

⁵⁷ Legislative Assembly, "Department of Provincial Secretary Mental Health Services Province of British Columbia Annual Report for Twelve Months Ended March 31st, 1951, Province Of British Columbia Annual Report - UBC Library (Victoria, BC: Government Printer), 59.

The Mental Health Services annual reports give insight into the various departments within Woodlands. With few sources concerning the everyday practices the annual reports serve as a valuable perspective in providing developments, statistics, and concerns. These reports are limited by their professional nature, providing information to the government that is crucial in determining the funding and needs of the institution. Due to the formal nature of the reports there is little insight into the actual experiences of residents, rather they are summaries indicating an overview of the year. These overviews are helpful in seeing what practices were considered important and what concerns were being brought to the forefront as the institution evolved to meet the needs of its residents.

Woodlands' history was unique because of its initial use for adults. Despite the additions of new wings and buildings, the original centre block of Woodlands harkens back to the stark nature of sparse barred windows of the asylum. While Woodlands' origins set it apart, it nonetheless shared similarities with other Canadian custodial training schools, namely Alberta's Provincial Training School (PTS), later renamed the Michener Centre,⁵⁸ and Ontario's Orillia Asylum for Idiots or Ontario Hospital School, later renamed to Huronia Regional Centre.⁵⁹ In *A Special Hell*, Canadian sociologist Claudia Malacrida discusses the history of the Alberta PTS, which first opened as a private girls' school and then a place for shell-shocked soldiers, but ultimately becoming a Provincial Training School for *mental defectives*.⁶⁰ Malacrida makes an important connection between Woodlands and Michener when considering the contemporary beliefs about people with disabilities by emphasising that despite any rhetoric to the contrary,

⁵⁸ Michener Centre served as a Provincial Training School for 'mental defectives' from 1923 to 1977. It was originally known as the Provincial Training School for Mental Defectives.

⁵⁹ Huronia Regional Centre served as an institution for developmentally disabled children from 1876 to 2009.

⁶⁰ Claudia Malacrida, *A Special Hell: Institutional Life in Alberta's Eugenic Years*, (Toronto: University of Toronto Press, 2015), 3.

these facilities were engaged in warehousing people rather than educating them.

In *A Class by Themselves?* education historian Jason Ellis examines the belief that children with disabilities, primarily behavioural- or cognitive-based, are malleable and therefore specialized education could help to rehabilitate them, possibly cure their issues.⁶¹ While this was not necessarily the same belief for physical birth defects and handicaps, the thought of taking children out of home care and into a specialized classroom demonstrated a special interest in a population that was typically contained in their homes with their families. Malacrida examines the early education reformers who saw the potential for improvements in behaviour through small educational facilities, which ultimately failed with the result that “institutions ceased to be seen as short-term interventions and began to take on more long-term and less-enlightened practices, shifting from the primary purpose from educating individuals to warehousing them.”⁶²

This narrative parallels what was happening in British Columbia with Woodlands’ shift to a Provincial Training School and offering occupational therapy for residents with the initial intention to educate and equip residents. One of the features of the transition to the training school was an element of training and education that, at least theoretically, reoriented the facility. In Woodlands, occupational therapy introduced residents to handicrafts, and training involved teaching residents to handle basic care and hygiene. This saw the girls participating in embroidery, knitting, and the creation of basic crafts like making tablecloths and articles of clothing.⁶³ The level of occupational therapy was determined by the residents’ abilities, mentally and physically. While the girls’ ages ranged from 18-54 their mental ages were from 3-12 which required assessment to determine what activities were appropriate. Girls who were wheelchair

⁶¹ Jason Ellis, *A Class by Themselves? The Origins of Special Education in Toronto and Beyond* (Toronto: University of Toronto Press, 2019), 184.

⁶² Claudia Malacrida, *A Special Hell*, 10.

⁶³ MHS, 1951, 59.

bound and could not attend occupational therapy outside of the ward were given work to do around the ward to fill their time.⁶⁴ Individualized therapy was not always accessible to all residents, especially with the wide range in ages and abilities. Along with that, there was also maintenance and upkeep that needed to be done within the ward, which the occupational therapy often contributed to through the girls making blanket slippers and embroidery runners, among other necessary hemming and fixing of clothing.⁶⁵

The boys' occupational therapy discussed in the annual report focuses on the use of the wood shop. While it states that many projects were completed, there were mostly small articles of furniture and props for various school related concerts. The boys were able to use and work with a drill-press and a power hand-grinder.⁶⁶ Unlike the girls' report, that for the boys does not mention the age range or ability of the residents involved with this therapy. These activities involve a greater need for supervision and care with instruction to prevent serious injury. This gender-based separation of therapy shows how some activities held a greater value or importance within the institution. The boys' work in the shop limited who could participate and learn skills. Much of these activities were not accessible to residents with physical disabilities. Both the boys and girls contributed to the upkeep of the institution whether directly through laundry services or general handiwork and maintenance or indirectly with repairing clothes and other items. Even though the work therapy of helping with the construction of the buildings and farming was no longer a significant aspect of life within the institution, the residents were still depended on to contribute to the institution through the means of occupational therapy.

For patients and residents, the shift to an education-centred model had different effects.

⁶⁴ MHS, 1951, 59.

⁶⁵ MHS, 1951, 59.

⁶⁶ MHS, 1951, 60.

In her autobiography, *Living with Labels and Lies*, former-resident Carol Dauphinais mentions that as a teenager in Woodlands she had very little interest in academic education, partly because of her past experience with public education in which she was tested as a *moron*.⁶⁷ Many factors contributed to her inability to succeed in public education, most notably her troubled homelife with abusive parents. Instead of academic education and occupational therapy, Dauphinais found herself often helping other children in her ward with getting dressed and eating as the staff had many residents to tend to and Dauphinais felt that she could avoid confrontation with staff by helping others.⁶⁸ At that time Dauphinais was not receiving education to further her skills with the intent to someday move out of Woodlands and live independently. For her, Woodlands appeared to be a life sentence, as is the case with Malacrida's mention of warehousing residents rather than rehabilitating them or providing them with skills to promote independence beyond a life in an institution.

Similarly, scholars studying Ontario's Huronia Regional Centre found that residents suffered from similar issues especially with population and shifting beliefs about special education. Kate Rossiter and Annalise Clarkson have examined the purpose and background of the institution through a Health Studies lens in "A Social History of Huronia Regional Centre." Rossiter and Clarkson's findings with respect to special education and the admission of younger children into Huronia (originally named Orillia Asylum for Idiots) shows "a growing belief in early detection and intervention as a means to 'control feeble-mindedness.'"⁶⁹ All three institutions involve instances of the malleable child, especially with feeble-mindedness and a potential to intervene through special education or therapies. Huronia also felt the strain of a

⁶⁷ Carol Dauphinais, *Living with Labels and Lies*, 14.

⁶⁸ Carol Dauphinais, *Living with Labels and Lies*, 41.

⁶⁹ Kate Rossiter and Annalise Clarkson, "Opening Ontario's 'Saddest Chapter': A Social History of Huronia Regional Centre," *Canadian Journal of Disability Studies* 2, no. 3 (2013), 9.

growing population as it was “chronically overcrowded with residents who had been removed from the educational system.”⁷⁰ Additionally, Rossiter and Clarkson recognize that there are three core issues that seem to be present in many institutional settings, those being isolation, overcrowding, and perpetual cost containment.⁷¹ From these issues they believe that bigger problems such as “gross neglect and maltreatment” tended to increase.⁷² Both were prevalent at Woodlands and Michener, and were concerns at the centre of the multiple class action lawsuits seen from former residents, survivors, of all three of these Canadian Provincial Training Schools.

This changing discourse on special education and the development of Provincial Training Schools occurred during a time of huge political change in power in British Columbia, seeing the Social Credit Party come to power. The 1952 British Columbia provincial election saw a shift in power from a Liberal to a Social Credit government after the election of the province’s longest serving premier in British Columbia, William Andrew Cecil Bennett.⁷³ Most commonly referred to as W.A.C. Bennett, his leadership began in an uneasy and uncertain time as it came on the heels of the Second World War. Fears of economic stresses and the potential for a post-war recession were on the forefront of British Columbians’ minds harkening back to the aftermath of World War One.⁷⁴ Their fears were unfounded as W.A.C. Bennett heralded in a new economic focus, particularly focusing on building in B.C.’s hinterland and supporting the development and utilization of the province’s natural resources, particularly with the expansion of forestry, hydro-electricity, and fisheries.

Bennett’s rise to power occurred after the switch to the single transferable ballot voting

⁷⁰ Rossiter and Clarkson, “Opening Ontario’s ‘Saddest Chapter’”, 9.

⁷¹ Rossiter and Clarkson, “Opening Ontario’s ‘Saddest Chapter’”, 8.

⁷² Rossiter and Clarkson, “Opening Ontario’s ‘Saddest Chapter’”, 8.

⁷³ W.A.C. Bennett was elected to the office of premier seven times in a row 1952-1972, ending a nineteen-year run of Liberal premiers.

⁷⁴ Jean Barman, *The West Beyond the West: A History of British Columbia* (Toronto, ON: University of Toronto Press, 2017), 286.

system.⁷⁵ The voting in the 1952 election had been close between the Social Credit Party and the Co-Operative Commonwealth Federation (CCF), but due to the new voting system many of the CCF supporters had picked the Social Credit Party as their second choice, which allowed them to get one seat more than the CCF, ultimately winning the election and forming a minority government.⁷⁶

At the same time the province saw a shift in the population in the downtown core of Vancouver and an increased number of families moving into the Fraser Valley and the rest of the Lower Mainland.⁷⁷ This expansion coincided with the transitioning of the Provincial Hospital for the Insane to the custodial training school, The Woodlands School.⁷⁸ With the decision to transfer the majority of adult psychiatric patients to Essondale it allowed Woodlands to become a training school for children with various disabilities.^{79,80}

W.A.C. Bennett's leadership was also responsible for the establishing the province's medical care plan. This plan helped to ensure that all residents would have access to medical care despite their income level, while also providing subsidies to those in the lower class.⁸¹ In relation to the population growth, there was a significant focus on families amidst a post-war baby

⁷⁵ The single transferable ballot system had voters rank the candidates on the ballot in terms of preference. First, the first choices on the ballots were counted. If one candidate won a majority of first choices in a riding, they were the winner. If there was not a majority for anyone, the candidate with the fewest votes was taken off and the second-choice votes on those ballots were given to the remaining candidates. The process continued until a candidate obtained more than 50 percent of the votes.

⁷⁶ Gordon Hak, "Populism and the 1952 Social Credit Breakthrough in British Columbia," *Canadian Historical Review* 85, no. 2 (2004), 279.

⁷⁷ Barman, *The West Beyond the West*, 309.

⁷⁸ When the institution first opened it was named The Provincial Lunatic Asylum, and later took on the names of the Provincial Asylum for the Insane and the Provincial Hospital for the Insane before being renamed The Woodlands School in 1950. In 1974 during deinstitutionalization school was dropped from the name, leaving it as Woodlands as the majority of the population were now adults and not children.

⁷⁹ Val Adolph, *In the Context of Its Time*, 89.

⁸⁰ Riverview Hospital was in operation from 1913 to 2012. It was originally opened as Essondale Hospital, named after Dr. Henry Esson Young (1862-1939) who was a physician and Provincial Health Officer in British Columbia.

⁸¹ Barman, *The West Beyond the West*, 316.

boom.⁸² This baby boom also coincided with the province deciding to give families an allowance for each child, which was paid to women as a way to encourage them to leave the jobs they had taken during the war.⁸³ Bennett's government additionally focused on expanding education and helping to make it more accessible through province-wide consolidation. This largely impacted rural areas with the closing or reorganizing of schools in favour of schools that catered to larger populations of students that one-room schoolhouses and other small schools could not offer. Despite this approach causing the closure of many small schoolhouses, it nonetheless provided a more streamlined education system offering schools up to grade 12, which in turn helped to encourage students to strive for post-secondary education as their elementary and secondary education was not cut short due to schools not offering all grades.⁸⁴ Students in cities did not feel the change of consolidation much due to their higher population, but students in the hinterland often had a tougher time getting to school. In some situations, the government provided subsidized boarding facilities to counteract the accessibility issues, but still the effects were felt harder by rural than urban students.⁸⁵

W.A.C. Bennett made significant strides in healthcare and education for the province of British Columbia. Bennett's time in office was complex and not entirely *the good life* that he had touted. His government, despite its initial lack of experience within the Social Credit Party, did contribute to the progress of the province in significant measurable ways. Despite the improvements that he made within the province there is little recorded impact on Woodlands School during this time. While Bennett was investing in the province he was solely investing in projects and initiatives that would provide a monetary payoff or return later down the line.

⁸² Barman, *The West Beyond the West*, 317.

⁸³ Barman, *The West Beyond the West*, 317.

⁸⁴ Barman, *The West Beyond the West*, 318.

⁸⁵ Barman, *The West Beyond the West*, 318.

Institutions like Woodlands and Essondale did not offer a long-term contribution to the province like the hydroelectric projects and therefore were not necessarily valid investments. Bennett's twenty-year stint in office saw little change in the operation of Woodlands which aligns with the lack of concern and investment in the care of children and adults within institutions. The move away from labour therapy and patient involvement in agricultural work which previously supported institutions was significant as they were not contributing in the same quantitative manner. The lack of effort put into building the Provincial Asylum only continued with a string of failures with poor planning, consistently subpar conditions, and minimal resources. The asylum was built out of an obligation to the government rather than as a moral duty to protect and care for its citizens. The failure of the institution only continued once it transitioned to the custodial training school when previous issues with the building and system were compounded with a larger population that needed more individualized care for children.

Chapter Two

“The Children No One Else Wanted”:

Remembrance, Education, and the Children of Woodlands School

On January 23, 1961, in an imposing stone building, Carol Dauphinais first stepped into Woodlands School. This was the first time Dauphinais had been sent to a school solely for mentally and physically disabled children. A social worker dropped her off at the day-room where she sat surrounded by children with Down Syndrome, a condition she had never seen before. She sat there, terrified and alone, having just come from Willingdon School for Delinquent Girls after being passed around foster homes for years. Dauphinais had been diagnosed a ‘low grade moron’ after her mother called a social worker to have her tested. She was taken out of school and waited two years before first being placed in Willingdon and finally at Woodlands, as the British Columbian education system did not consider her capable of achieving the academic and behavioural standards necessary to attend a “normal” public school.¹

Dauphinais’ story is important because it sheds light on an institution that housed children during a period that put great faith in institutionalization as the best option for children with disabilities. Beyond Dauphinais’ work, this research examines provincial sessional reports, newsletters, provincial and national newspapers, administrative reviews and other archival sources to better understand how people like Dauphinais, a resident, and Val Adolph, a staff member, have remembered this institution. These documents not only begin to show significant differences between patient and staff accounts, but also challenge us to think about the purpose, uses and intentions of institutions like Woodlands.

¹ Carol Dauphinais, *Living with Labels and Lies: A Life Story* (Vancouver: Coast Foundation Society, 2001), 14.

The years following World War II saw a shift provincially and nationally in the consensus as to who and why people should be subjected to mass confinement for mental and physical disabilities. The Provincial Asylum in British Columbia, which housed people suffering from various forms of insanity, was in the process of reorganizing itself. New institutions were built in the provincial system, and patients were reclassified along lines of diagnosis and age. Adults and people with more severe psychiatric cases moved to the nearby Essondale Psychiatric Hospital, while children deemed feeble-minded and physically handicapped stayed at the Asylum through its transition to Woodlands School in 1950.²

At the height of institutionalization, British Columbia advised against keeping children with disabilities at home.³ As the Dauphinais case illustrates, health and education officials claimed that children like her should be segregated for their own good, because they could not thrive in a regular classroom environment.⁴ Of course, the reverse may have been the more immediate concern – that children with cognitive impairments could potentially be considered disruptive in the classroom or require too much of the teacher's attention. In Dauphinais' case her abusive and neglectful home life contributed to an even greater disparity between her and her classmates leading to her missing school and unable to keep up with her schoolwork or settle into a routine.⁵ At this time children with cognitive impairments were funnelled by the Superintendent of Child Welfare into provincial training schools like Woodlands. Provincial training schools were favoured over public education as they were designed for children who

² Val Adolph, *In the Context of Its Time* (Victoria: Govt. of British Columbia, Ministry of Social Services, 1996), 87.

³ Melanie Panitch, *Disability, Mothers, and Organization: Accidental Activists* (New York, NY: Routledge, 2008), 101.

⁴ Dauphinais, *Living with Labels and Lies*, 15.

⁵ Dauphinais, *Living with Labels and Lies*, 13.

needed additional assistance through an adaptive approach to education. According to health and education officials it was an opportunity to socialize children with similar disabilities and provide them with a safe environment with caregivers and educators who were familiar with disabilities. Not only was it considered a safer option for students, especially ones in situations like Dauphinais', but it also reduced the strain on families who were struggling financially and emotionally to provide adequate care for their children with disabilities. Schools like Woodlands gave hope to families, in that an education specialized to their needs provided more opportunities for their children's futures.

An additional benefit to the system was that places like Woodlands meant that children deemed unfit for public schools were segregated in institutions rather than supported them within the public system. This meant that teachers were not required to have specialized training nor deal with the 'burden' of giving special attention to students with greater needs and could in turn focus on teaching the other students. Also, in an out of sight, out of mind way, the province did not need to provide added assistance or accessibility within the community. By containing the 'problem children' it meant that society itself (and by extension the government) did not feel an urgent need to adapt and provide support to them, especially since many residents were placed in institutions in their youth and stayed well into their adulthood, if not for the rest of their lives.⁶

The children of institutionalization remember their time in these schools differently than those who cared for them. As an adult, Dauphinais reflected on her early life and time in and out of British Columbia institutions and decided to share her story through an autobiography.

Dauphinais' book *Living with Labels and Lies* was published in 1997, a year after Woodlands

⁶ Dulcie McCallum, *The Need to Know: Administrative Review of Woodlands School* (Victoria: Government of British Columbia, Ministry of Children and Family Development, 2001), 15.

closed its doors. In its preface, she states that she wrote her story “on behalf of all children, young and old, who’ve been abused by people who should be protecting them, and especially for children still in abusive situations.”⁷ Dauphinais' account is a memoir of someone deemed mentally deficient at a young age and describes her persistent attempts to push against that label and the experiences that she felt defined her life in that system.

Dauphinais requested and eventually acquired her records from the Provincial Social Service Department and with the assistance of her co-author, Joanne Broatch, they stitched together Dauphinais' past, focusing mostly on her journey through the child welfare system and institutions like Woodlands. Dealing with a memoir like Dauphinais' it is important to consider the context of Dauphinais' writing. When she met Broatch, she had 300 handwritten pages of memories. Those pages were written during the height of deinstitutionalization just prior to the closure of Woodlands School from Dauphinais' perspective as a middle-aged woman reflecting on her childhood. In particular, by the 1990s strategies had shifted from mass confinement of children with disabilities to community-based treatment plans. This saw the push towards a more inclusive public education system with children returning into mainstream classrooms.

Dauphinais' memoir is a fraction of the initial 300 pages she began with. Broatch's involvement lends to the memoir being curated to represent Dauphinais' life and truth as she chose. It is hard to know what has been edited out or how specific details have been remembered, yet Dauphinais' account serves as an important insight into a person who has experienced first-hand the complex nature of the institutional system. Woodlands is only one chapter in Dauphinais' memoir as the rest delves into her struggles and successes in a system that

⁷ Dauphinais, *Living with Labels and Lies*, 3.

continually let her down. Dauphinais' experience cannot be taken to represent all residents who lived at Woodlands. For many Woodlands was a safer and better option than the conditions they lived in prior. Because there are so few voices left to speak out about their experiences, the value of Dauphinais' memoir has become ever more important in piecing together the past.

Additionally, during the 1990s questions surrounding the continued use of institutions like Woodlands School were coming to the forefront. Previous treatments and practices were scrutinized by former residents and their families for their cruelty and the potential criminality and neglect within the institution which put into question the wellbeing and care of its residents. Psychiatric treatments previously considered acceptable such as lobotomies, hydrotherapy and electroconvulsive therapy were now seen as cruel and inhumane.

Despite the thousands of children who entered Woodlands, there are very few recorded accounts from actual residents. This was due in part to the demographic which it served - namely, children with various disabilities, many of whom were non-verbal or lacked the ability to readily share their experiences. Likewise, many former residents did not live long enough to see the closing of Woodlands. Often residents were admitted to Woodlands at a young age, but unlike other schools in which students graduate or otherwise move on, residents stayed at Woodlands for long portions of their lives - sometimes to their natural end. Such residents had no idea what a traditional school and living environment looked like nor how they were supposed to be treated.⁸

In 1950, when Woodlands opened as a training school, administrators discouraged parents from visiting children, to the point of deterring and denying them visitation for periods of

⁸ McCallum, *The Need to Know*, 15.

time, so their children could adjust to their new living situation and their treatment without the influence and distraction of family. As a whole, Woodlands discouraged visitors and therefore there are few accounts from parents in which they discuss their opinions of Woodlands.

Dauphinais' book serves as one of the few first-hand accounts of Woodlands School from the perspective of one of its residents. Much of the archival material stemming from that period is internal correspondence, newsletters and other materials produced by staff or administration. Because of the nature of the school, focusing on 'feeble-minded' children, very little has been written from the perspective of the residents. With a custodial training school like Woodlands', residents are limited in how they can tell their story due to their disability. Dauphinais' story is important because of how little we otherwise know about the different experiences of the time, or how residents understood their role within the school, or even the reasons they were admitted to Woodlands and not simply put into schools for delinquents. In Dauphinais' instance, she's now an adult remembering a time much earlier in her life and recognizing that the life experience and knowledge gained through the years affects how she interprets the past.

Dauphinais, the fourth of ten children, was raised in extreme poverty with an alcoholic mother and physically, sexually, and emotionally abusive father. This is the backdrop against which we must read Dauphinais' work, as those factors were key contributors to Dauphinais' diagnosis, failure in the public school system, and her eventual removal from her family. They also shape her views towards society, the foster system and her experiences at Willingdon and then Woodlands.

Living with Labels and Lies does not portray Woodlands favourably. During the early 2000s Woodlands made headlines in the media when administrative review was requested after claims of abuse and mistreatment of residents came to light. A class action lawsuit began after

Ombudsman Dulcie McCallum found that Woodlands had been a breeding ground for abuse in varying degrees during its 118 years of operation. The newspapers and news reports focused heavily on the accounts of a handful of former residents. With many of the former Woodlands residents now deceased, it amplified the need not only for an acknowledgment of the wrongdoing that occurred in the institution, but also an effort for it not to be forgotten. The survivors wanted a public apology and compensation for the abuse they suffered while in Woodlands. The province failed to protect and give proper care to children, society's most vulnerable population, when residents and their families were told that it was in their best interest to be institutionalized.⁹

While the outcry from Woodlands survivors spoke loudly in the media, this situation is much more complex. McCallum's review was specifically looking for instances of abuse and a failure of the institution. The years of care and concern for residents will not be found within patient records nor will be voiced during the attempt to gain compensation from survivors. McCallum acknowledged that "many staff showed great affection and loving concern for the children and adults in their care" recognizing that this is not a situation where all the staff can be labeled as inhumane or abusive.¹⁰ Rather, these instances of abuse stem from greater issues within the institutional system, and the beliefs and practices associated with the time period.

In the administrative review McCallum recommended that survivors not be forced to go to court, due a "judicial system that has been historically under-inclusive and inflexible with respect to accommodating for difference associated with having a mental handicap."¹¹ Rather

⁹ Roxanne Gregory, "Woodlands School Survivors Seek Settlement," *The Georgia Straight* (October 14, 2009). <https://www.straight.com/article-262829/woodlands-school-survivors-seek-settlement>

¹⁰ McCallum, *The Need to Know*, 14.

¹¹ McCallum, *The Need to Know*, 25.

McCallum wanted them to be heard so that proper compensation could be determined. It was found that a significant amount of Woodlands' files were set to be destroyed just prior to the review, but government personnel were able to recover what had yet to be destroyed.¹² The lack of staff recording and reporting of any suspicious instances made proving the abuse even harder. The province required former residents to prove that they were abused. A points system similar to what was being used for the survivors of Indian Residential Schools, in which each form of provable abuse was associated with a number, determined how much financial compensation each person was entitled to.

In 2003, the Minister of Child and Family Development issued a public apology to the survivors of Woodlands, although the province did not acknowledge that abuse occurred at Woodlands.¹³ Rather, they recognized that people were harmed while in the care of the province and that the institutional model was flawed and created a depersonalized environment, which led to the mistreatment of residents at Woodlands.¹⁴ The province did not accept responsibility for the abuse that occurred at Woodlands, but rather just acknowledged that the model was flawed. This deflected the blame to the institutional model, which in turn let the province avoid taking any real responsibility for what happened to the residents of Woodlands.

During the inquiry former staff and administration were not included amongst those interviewed, which meant that the public was given a very one-sided perspective on the happenings within Woodlands. The few residents who did speak to the media often told extreme stories of having their teeth pulled out with pliers if they bit someone, having hot water poured

¹² McCallum, *The Need to Know*, 25.

¹³ "Apology for Former Woodlands' Residents," CBC News (CBC/Radio Canada, May 31, 2003), <https://www.cbc.ca/news/canada/british-columbia/apology-for-former-woodlands-residents-1.397990>

¹⁴ "Apology for Former Woodlands' Residents," CBC News (CBC/Radio Canada, May 31, 2003).

on their genitals in order to make them urinate, or being restrained for hours.¹⁵ It was not the time, nor were they in a position to recount the kindness that they might have experienced within the institution. That time was specifically for speaking out about the abuse and trauma they experienced. While it is certain that such abuses did occur, for many like Dauphinais, Woodlands was a safer option than being at home with their family, in shelters or on the streets. For some, institutions like Woodlands were a viable alternative to struggles of trying to live in an able-bodied world, especially if they were already adults and no longer had access to supports they potentially had as a minor. That being said, for many, the experience of being in an institution is remembered as trying and difficult.

The recollections of staff members presented a different view. An important detail regarding Adolph's books is that they were published by the British Columbia Ministry of Social Services and were released the same year as Woodlands' closure. Institutionalization was under a lot of scrutiny with the shift towards community-based care happening at the time. This can be seen within the sources with a reluctance to admit to the failure of institutionalization or the problems that were occurring. By questioning the effectiveness of Woodlands it leaves room to highlight flaws in the greater system, which is not what an institution wants when it is in the process of being shut down. This government funded perspective of Woodlands allows for an emphasis on the successes and control over how the institution is historically remembered. *In the Context of Time* gives a greater social context during the evolution of Woodlands from jail to asylum to custodial training school, but it still does not consider the evolution of mental health

¹⁵ Alan Fryer, "The Children of Woodlands," *The Woodlands - Children of the Woodlands B.C. - Class action lawsuit* (W-Five, October 21, 2006), https://canadiancrc.com/Newspaper_Articles/CTV_W-Five_Children_of_Woodlands_21OCT06.aspx

services within the public institutions in British Columbia.

Memories of Woodlands is a collection of anecdotes gathered from former staff members. These stories, often lighthearted and humorous, tell a very different account than Dauphinais' and other former residents. From tales of a male attendant prankster to one liners and Christmas memories, the stories depict a very sanitized version of Woodlands. While staff recount stories of their favourite patients and events, there is only a small section in the book "From a Resident's Perspective" by a former resident named Marion. Marion's brief contribution is very a matter of fact, discussing the years she was at Woodlands and the activities she did.¹⁶ In sections of the book like "You Had to Laugh" and "No Animals Allowed" the staff and administration make light of the ongoing issues of overcrowding and the lack of educational opportunities within the school. As readers we must read Adolph's work against the grain recognizing the influence of authority not only in the decision of which stories to include in the greater collections, but also the influence of the Ministry of Social Services who produced the book.

There are a few instances in *Memories of Woodlands* that give the reader pause, like the offhanded discussion of a homicide in which a young male resident covered a woman with piles of rags and shavings and set her on fire. The inclusion of darker memories may be Adolph's attempt to give balance to the anthology, but they come across as jarring and tend to confirm the darker accounts of the other residents. That being said, the staff were asked to share their favourite memories of Woodlands, and those as demonstrated within Adolph's book were happy, positive times. Those memories as the staff remembers them are valid and important to the overall narrative of Woodlands, recognizing that there was room for good, and that relationships

¹⁶ Val Adolph, *Memories of Woodlands* (Victoria: Govt. of British Columbia, Ministry of Social Services, 1996), 119.

and comradery were important to them. While it is important to make space for as many perspectives as possible it is also necessary to consider the role of Woodlands in the greater context of Western Canada and Canada as a whole.

British Columbia's Mental Health Services annual reports tell a different narrative than Dauphinais' or other former residents'. These reports, submitted to the Director of Mental Health Services by the school's Medical Superintendent, began in the 1950s providing the government with highlights over the last year from the various departments within the school. Coming solely from a bureaucratic perspective, the reports were filtered through levels of administration before reaching the office of the Director of Mental Health Services. As these reports do not name individual residents, the information contained within them is statistical, full of generalizations, and clinically dispassionate. The educational, occupational, and recreational therapy reports help us to see changes in methods, values, and approaches over time compared to the greater context of institutionalization during that time period.

Dauphinais' life did not end with Woodlands, though she did spend two years and three months there before she was given leave for a "home visit" for Easter to see her grandparents in Comox on Vancouver Island. Shortly after getting on the bus to take her back to Woodlands, her father boarded and dragged Dauphinais off. He took her to his shack near Black Creek where he held her captive and abused her for over two months before she managed to escape. Woodlands declared her AWOL and after three months discharged her. After escaping the horrors of her father, she was taken in by a woman she refers to as Aunt Gwen, eventually taking night classes, finding a career in the hospitality industry, and ultimately getting married.¹⁷

¹⁷ Dauphinais, *Living with Labels and Lies*, 93.

Dauphinais' story is only one among the many thousands of those who spent time in custodial training schools in Canada. With the wave of deinstitutionalization now behind us, the stories from these institutions are slowly being erased by the passing of generations and the demolition of the buildings from the physical landscape. Woodlands School challenges us to contextualize the purpose and uses of custodial training schools in the twentieth century and consider the legacy of institutions and how we choose to remember them.

In the era of post-deinstitutionalization scholars and historians are analyzing archival materials in order to gain a more nuanced understanding of these institutions, often shifting the lens to focusing on the experience of the patient. Malacrida examines what she refers to “ordinary and extraordinary violence” used in Michener Centre. In this context, ordinary violence is a routine treatment or action towards inmates,¹⁸ typically unprovoked, like pushing, shoving or being on the receiving end of harsh and abusive language.¹⁹ Michener’s medical records are filled with notes of injuries, yet provide no explanation as to how the inmates obtained them or how they could be avoided in the future. If there is an explanation, the description is specific about the extent of the injury without any understanding of the cause, as if the injury appeared “without incident and without source.”²⁰ Equally as important is the use of extraordinary violence resulted in severe injuries. As Malacrida explains, this violence, like the less severe ordinary kind, is well documented but appears in records in “mysterious and disconnected” ways, which could be attributed to a high level of tolerance among staff for

¹⁸ At Michener Centre patients were referred to as inmates, while at Woodlands School they were referred to as residents.

¹⁹ Claudia Malacrida, *A Special Hell: Institutional Life in Alberta's Eugenic Years* (Toronto: University of Toronto Press, 2015), 94.

²⁰ Malacrida, *A Special Hell*, 94.

routine violence.²¹ It is important to remember that during this time of institutionalization, people with disabilities were often viewed as not having the same pain threshold as able-bodied people, therefore contributing to the routine dehumanizing actions associated with their care.²²

This simplistic and almost clinical way of recording incidents of violence in medical records was equally common at the Woodlands School, if not even less rigorously documented. In Ombudsman Dulcie McCallum's *The Need to Know* report, which draws from reviewing medical records, she states that "actual details of the incident of abuse itself are often absent from the resident's file though evidence can be found through careful scrutiny of the resident's records that corroborates that the incident or incidents occurred, that injuries were sustained and how they were managed."²³ Similar to reports from the Michener Institute in Alberta, the instances of injury and abuse were rarely documented but instead presented in vague language and lack explanation or evidence to prove wrongdoing by specific people or further concern for those actions. A policy against abuse was consistent at Woodlands, yet as McCallum outlines in her report there were many factors that contributed to the systematic violence that occurred at Woodlands. While McCallum does not use the term "ordinary violence" her findings relay details of hitting, kicking, smacking, restraining, slapping, grabbing of hair and limbs, bruising, scratches, broken limbs, among instances of verbal and sexual abuse, all which seem to be common practice in custodial training schools and institutions.²⁴ Instances of "extraordinary violence" at Woodlands tended to appear in records in grievance or reprimand files as a dismissal or suspension written by senior staff.²⁵

²¹ Malacrida, *A Special Hell*, 99.

²² McCallum, *The Need to Know*, 14.

²³ McCallum, *The Need to Know*, 18.

²⁴ McCallum, *The Need to Know*, 18.

²⁵ McCallum, *The Need to Know*, 17.

The work of Malacrida and McCallum raises deeper questions of how scholars approach documents from institutions like Michener and Woodlands. While former patients and staff recognize abuse occurred, there remains a disconnect between their accounts and the lack of specifics and clarity in certain instances in official records. A certain level of ‘codebreaking’ of this language is necessary to read and understand the files. Typically, these records were written by staff, and in Woodlands’ case the staff were continually challenged with overcrowding and an insufficient amount of staff to give proper care to all the residents and therefore either did not keep detailed records or used a shorthand. The lack of documentation of incidents was not necessarily driven by a desire to conceal, but rather that it fell in the category of ‘ordinary violence’ and were not considered noteworthy. This in no way condones the actions but shows that to really understand the records and documentation historians need to incorporate input from staff. Malacrida, for example, uses former staff to reflect on their time at Michener Centre and consider what was treatment and what was punishment for patients. It is difficult not to point fingers or villainize former staff, especially when scathing reviews such as McCallum’s are brought to light, but as McCallum mentions, places like Woodlands were indeed filled with loving and thoughtful staff who truly cared about the wellbeing of residents and did their best not only to protect but helped residents to thrive behind Woodlands’ walls. The administrative review is not about praising all the good that happened at Woodlands, but rather about recognizing and acknowledging the wrongdoing and abuse against the province’s most vulnerable people that occurred while they were in the care of an institution that was supposed to protect them.

Also, McCallum recognizes that behaviour modification techniques were common and acceptable practice to use with children with mental handicaps to control and adjust their

behaviour, as well as a form of discipline and punishment.²⁶ Along with that, there was an underlying belief that the residents, because of their cognitive or physical disabilities, were essentially “less than human.”²⁷ Because of that, when slapping, kicking or other behaviour correcting actions were administered it was not seen as hurting the residents because they were considered by staff to be less intelligent and therefore did not experience the same pain or trauma. Dauphinais reflects on this belief about staff in regard to the frequent slapping she experienced at Woodlands. The way she saw it, “once they labeled you retarded, they decided you had no feelings”²⁸ which rationalized the violence and actions being taken towards her and other residents.²⁹

McCallum points out that “disabled residents were often misunderstood, degraded and devalued to an even greater and more pronounced extent than many other institutionalized children,” which meant staff rationalized their actions due to the lack of understanding and feeling on part of the residents, and it allowed them to discipline freely and frequently in harsher ways than used on residents without disabilities.³⁰ This underlying belief of the time about people with disabilities requires a closer look at codebreaking or specifically the use of encoded language. This can be seen through what is absent from the records, but also on a purely practical level with staff conditioned to use a certain language. This was evident in McCallum’s analysis of resident records as instances of abuse were often oversimplified or reported as behaviour modification. This can also be seen through reports, newsletters, and records as emphasis and priority is placed upon the positive and lessened on issues that may be detrimental. This also

²⁶ McCallum, *The Need to Know*, 14.

²⁷ McCallum, *The Need to Know*, 14.

²⁸ Dauphinais, *Living with Labels and Lies*, 39.

²⁹ Dauphinais, *Living with Labels and Lies*, 39.

³⁰ McCallum, *The Need to Know*, 14.

speaks to the environment of the school where a high resignation rate saw the dissatisfaction of staff, yet the overall need to continue the momentum with providing education within the institution.

It is unclear if Dauphinais attempted academic education while at Woodlands but the last time she had been in the public education system she was fifteen and still in grade five. Her first experience with education was tough, the overstimulation of the other children and her difficulty assimilating with the other students who came to school with “shoes that fit and hair that was washed, combed, braided and tied with ribbons.”³¹ Dauphinais’ home life caused her to miss a substantial amount of school each year with her staying home to clean up after her alcoholic mother and younger siblings. Also, Dauphinais was heavily verbally abused by her mother and other adults that frequented their home, especially when trying to keep up with schoolwork. When she did not understand a concept and her mother would attempt to help her, Dauphinais would be called “the idiot” or “dummy”, which only confirmed the assumptions she already had concerning her own intelligence.³² Her unstable and abusive home life contributed to her inability to function within the traditional public school system, prior to any diagnosis about her intellectual abilities. At Woodlands, Dauphinais may have had access to academic education, but at that point she was well into her teenage years and believed that she was beyond being able to be educated:

I could have gone to class to learn some language skills. I was 16 and couldn’t read past grade two and couldn’t write well at all but I had already been convinced I couldn’t learn. I thought I was too stupid and too old. We had crafts but I hated weaving baskets. Sometimes we were taken swimming and sometimes we could roller skate. But playing

³¹ Dauphinais, *Living with Labels and Lies*, 12.

³² Dauphinais, *Living with Labels and Lies*, 13.

isn't much fun when you do it only when you're given permission and when it's always, always, under strict, and sometimes rough supervision.³³

Instead, Dauphinais started working with power sewing machines. This was short lived when she realized that she was sewing restraints and straitjackets. After that, Dauphinais spent part of each day taking care of other patients in her ward. She helped feed, dress, and change diapers of patients. It was during these moments of taking care of others that she felt most useful and hoped that the time she spent with them might balance out the slapping and hitting they experienced from some of the nurses.³⁴ Dauphinais' time circled around taking care of others, with occasional short trips into New Westminster with staff. The short reprieves from Woodlands offered a mix of freedom and embarrassment as wherever residents went people "knew we were retards" and were subjected to the public's judgmental stares.³⁵

The Woodlands School sections of the British Columbia Mental Health Services sessional reports between 1950 and 1960 offer a contradictory narrative to the traditional progressive narrative typically associated with special education, auxiliary classes, and vocational schools. Prior to the practice of mental hygiene it was the belief of medical professionals that IQ was the cause of learning difficulties and the source of behavioural problems, thusly inferring that the cause of the mental defects was hereditary.³⁶ The gradual shift to the mental hygienist's view incorporated the idea that those suffering from emotional and behavioural problems could change through education and personality adjustment. Environment also played a role in the adjustment as changing the surroundings for a person could in turn

³³ Dauphinais, *Living with Labels and Lies*, 42.

³⁴ Dauphinais, *Living with Labels and Lies*, 41.

³⁵ Dauphinais, *Living with Labels and Lies*, 44.

³⁶ Jason Ellis, *A Class by Themselves? The Origins of Special Education in Toronto and Beyond* (Toronto: University of Toronto Press, 2019), 64.

contribute to a change in their mental condition.³⁷ While the term well-adjusted was not applicable to children with disabilities, they could never fit the definition of lacking deformities, having strong scholastic capabilities, and emotional security, they could benefit from vocational and handicraft schools. The goal was less on becoming well-adjusted but rather instilling self-reliance and mature emotional independence in a balanced way that was realistic about their capabilities, but still challenged them beyond what they had previously been believed to be their limitations.³⁸

In regard to Woodlands, as a whole it was meant to educate children on the basic skills needed to take care of themselves along with academic and vocational training. For some residents it would be possible to eventually transition to community-based living, while the majority would spend their lives in Woodlands dependent on others. In 1950, the year in which Woodlands switched from a hospital/asylum to be a custodial training school there were 8 staff, 22 classes and 200 pupils.³⁹ There were academic, domestic-science (preparing and cooking meals), basic handiwork (sewing), and general play classes for students. School not only provided education not previously accessible to residents, but also allowed for a temporary reprieve from the mundane and boring routine-based environment residents had been subjected to. Enrolled student populations fluctuated from the initial 200 in 1950, up to 400 in 1952, then continued to vary between 200 and 300 for the rest of the 1950s. As the population increased so did the number of classes and their specialization. Initially the classes were rudimentary with domestic-science expanding out to include more community involved activities such as

³⁷ Ellis, *A Class by Themselves*, 184.

³⁸ Ellis, *A Class by Themselves*, 188.

³⁹ Legislative Assembly, "Department of Provincial Secretary Mental Health Services Province of British Columbia Annual Report for Twelve Months Ended March 31st, 1951, Province Of British Columbia Annual Report - UBC Library (Victoria, BC: Government Printer), <https://dx.doi.org/10.14288/1.0343147>, 57.

participating in May Day and frequent trips to nearby Queen's Park. Within the school Halloween, Valentine's Day and Christmas were celebrated, typically with a student-based concert or show for Christmas, along with smaller parties and dances for the other holidays.⁴⁰

A few notable points tying back to Jason Ellis' work on special education are the high turnover rate for teachers and the exclusionary actions towards students with lower IQs in the latter half of the decade. The 1957/58 sessional report submitted by Dr. L. A. Kerwood, Woodlands' Medical Superintendent addresses staffing and teaching issues:

The major problem during the last year has been a shortage of adequate training staff and the exceptional staff turnover. There is need for the establishment of a course of training both to further develop the psychiatric nurses in their special skills required in caring for the retarded and for the aides so that all staff may take a fuller and more dynamic share in meeting the special needs of the retarded person in the residential training school.⁴¹

Dr. Kerwood's concerns are founded as resignations during that decade ranged from 2-4 a year, which is substantial considering that they started with 8 teachers, a number which grew over time. In 1953 there were 3 resignations from education leaving them with 9 staff members. Such high turnover shows a dissatisfaction among staff, likely due to the lack of proper training or the lack of foresight into the educational needs and demands of the residents. That same 1957/58 report indicates that there were 325 residents in the school program. Of those students only 30 were able to have the full five-hour school day, simply because of the lack of staff. By comparison, if all eligible Woodlands students (525 pupils) were in a conventional special education school with auxiliary classes they would need approximately 27 teachers to fill the staffing requirement. While the report does not specify the exact number of teachers employed

⁴⁰ MHS Report, 1952, 79.

⁴¹ MHS Report, 1957/58 (1959), 90.

that year, the inclusion of the concern over staff shows that, like the rest of Woodlands, the education department suffered from a lack of staff to have ideal ratios of students to teachers.

The 1960/61 report shows a time-table alteration illustrating a shift in which students had access to education. The report states that, “certain children in the imbecile range had to be excluded from school under a policy decision to make available to those less severely retarded a fuller school-day.”⁴² This attempt to better utilize teachers to cover more residents took an exclusionary stance towards students who would benefit from education and stimulation outside of their ward. Jason Ellis’ work deconstructs the development of special education in Canada, from exclusion and segregation to the continued attempt at inclusion, bringing children who have historically been excluded from traditional education back in the classroom. Woodlands School serves as an exception to the narrative as we see with residents like Dauphinais with scattered educational backgrounds who may have not qualified for academic education or just refused it due to the external messages of being labelled an idiot and incapable of learning. While the province claimed that custodial training schools were the safest and healthiest place for children with disabilities and other mental and emotional conditions, it was far from being an effective academic and vocational school.

Dauphinais’ experience in Woodlands helps to situate the custodial training school within British Columbia during the height of institutionalization. It also demonstrates one of many complicated narratives of children that were segregated in institutions partly because of their assumed IQ and problematic homelife. The exclusionary nature of schools at the time pushed children with behaviour or physical issues into separate special education classrooms with the

⁴² MHS Report, 1960/61, 104.

belief that there was potential to cure some of these problems through behaviour modification. Additionally, these complex experiences were not isolated to the West Coast, as other parts of Canada, including Alberta and Ontario, also had custodial training schools that struggled from the same systematic issues. While Dauphinais did not stay in Woodlands until its closure, her narrative gives a unique perspective into the period after its transition to a custodial training school and just prior to the beginning of downsizing during the time of deinstitutionalization.

Chapter Three

“It was the only way I thought I could close Woodlands”:

Mothers, Woodlands School, and the Fight for Deinstitutionalization

Jo Dickey knew that something was wrong with her son Drew when she brought him home from the hospital. As a newborn he had trouble breastfeeding and Dickey noticed his ear lobes were turning blue. After taking him to the doctor they discovered that Drew had a hole in his heart. It was 1955 and the pediatric surgery to repair his heart was not yet established/available. The doctors told Dickey that Drew had six months to live, so she was given an unknown prescription and sent on her way.¹ It was clear that Drew had also suffered cognitive damage and would spend the rest of his short life disabled. Dickey enrolled Drew into a preschool for children with disabilities, which is where she started getting involved with other families and engaging in parent activism with the North Shore Association for the Mentally Retarded.

Prior to having Drew she weaved through different career options before settling on physiotherapy. As a woman of small stature, at 5’2”, Dickey felt the pressure from her classmates and colleagues, many of whom she described as “all amazons” compared to herself.² This position for Dickey as the underdog continued as Drew became less verbal and more aggressive. This shift in her son’s behaviour caused greater concern for Drew’s family as he was shuffled to Evandale temporarily. Later, without warning, Drew was transferred to Woodlands School. This move angered Dickey and she immediately went to Woodlands to see her son. In Michelle Panitch’s *Disability, Mothers, and Organization: Accidental Activists*, Jo Dickey describes her experience:

¹ Melanie Panitch, *Disability, Mothers, and Organization: Accidental Activists* (New York, NY: Routledge, 2008), 61.

² Panitch, *Disability*, 64.

I drove to Woodlands. The Superintendent (who they called the Psychiatrist) said to me, your son is here. Yes, I said, and if it takes me the rest of my life I will get him out of here. It's the last place I want him. So of course I was tagged right there as a trouble-maker. There was a desk where you have to check in but I learned what ward he was on so I kept going. There was a heavy door, and when they opened it I put my foot in. They offered to bring him to see me but I said, No! I am going to see my son. So for a month I went every day and I sat with him. They hated it, they just hated it . . . if you've ever seen Cuckoo's Nest you know exactly what those places are like.³

This passage offers significant insight into the attitudes during the 1960s when Drew was admitted to Woodlands. Jo Dickey's response to not wanting Drew in Woodlands went against the traditional role of the mother of a disabled child. Panitch states that the late 1940s saw the organizing of groups of women in places, one being Canada, that began "resisting the enormous social pressure" to place their children in institutions.⁴ These institutions were labeled as the best place for these children at the time. Dickey fought against this notion on day one of Drew's entrance into Woodlands. While at Evandale for three months, Dickey was not allowed to see Drew at all. Parent involvement in the lives of children with disabilities is a complex, multi-layered topic, which Dickey time and time again pushed back against the social norms. When a family did want to be involved in care plans for an institutionalized child, and expressed concern over their wellbeing, such parents were often labeled as a "trouble-makers." As we will see in the development of the Woodlands Parent Group, the goal of the group was not to make trouble, but rather to take a calm and collected approach in order to effect changes in policy and to alter the conditions for their institutionalized children.

Jo Dickey's story is like many mothers of disabled children at the time, forced to make hard decisions about the care of their children. Panitch draws on Rannveig Traustadottir's study "Mothers Who Care: Gender, Disability, and Family Life" which explores the gender dynamics

³ Panitch, *Disability*, 63.

⁴ Panitch, *Disability*, 3.

between parents, specifically the role of the mother when taking responsibility for their children's care. Much like with Jo Dickey, Traustadottir found that mothers were far more likely to advocate for their disabled child.⁵ They were pushed by the internal knowledge that it was "the right thing to do" similar to Jo Dickey's experience in advocating for her son.⁶ The father's role tended to be that of the supporter, with the expectation that the mother would stay at home with the child with a disability and provide the daily support that was needed.⁷ This meant that if both parents were employed outside of the house prior to the birth of the child, it was the mother who was expected to give up her career and take care of the child. While Jo Dickey tends not to discuss her husband's role in the care and advocacy for her son, she did give up her career as a physiotherapist in order to care for Drew full-time. Additionally, Traustadottir found that the father's role was very much behind-the-scenes and heavily focused on the economic support for the family and being supportive of the decisions of the mother.^{8 9}

Panitch's *Disability, Mothers, and Organization*, which highlights Jo Dickey's activism, is based upon interviews with three activist mothers. The insights from Panitch's study help to illustrate the early days of the Woodlands Parent Group. It serves as the base from which to examine the role of parents in relation to Woodlands School. Parents left behind other documents too, which are now housed at the University of British Columbia archives. Jackie Maniago, one of the founding members of the group, donated her substantial collection of documents, which she saved from the beginning of the parents' group in 1976 to the closure of Woodlands and the

⁵ Rannveig Traustadottir, "Mothers Who Care: Gender, Disability, and Family Life," *Journal of Family Issues* 12, no. 2 (June 1991): 219.

⁶ Traustadottir, "Mothers Who Care", 219.

⁷ Traustadottir, "Mothers Who Care", 220.

⁸ Traustadottir, "Mothers Who Care", 221.

⁹ Traustadottir also notes that women who rejected the traditional mothering role, especially those with children with disabilities, tended to be labeled as "deviants" which, along with "trouble-maker," was an all too familiar judgment placed upon mothers like Jo Dickey

fight for compensation by its survivors in the 2000s.

The archival materials include newsletters, correspondence with government officials and Woodlands administration, meeting minutes, training guides, newspaper clippings, photographs, and other diverse materials pertaining to Woodlands Parent Group and its efforts to close Woodlands. With there being a wealth of documents saved from over the years a narrowed focus was necessary to draw out what sources are most relevant. Because there is no guide or indicated way to read these documents, the sources used within this chapter are ones which had been typed up, (opposed to handwritten notes) and official materials created by the Woodlands Parent Group. Through this the goal was to use documents that had been processed through the group rather than coming from sources that might not have not been seen by multiple people. While these documents are still open to interpretation, the intent is that they have been vetted more than handwritten notes or unofficial correspondence. Specifically, sources which gave insight into the practices within Woodlands (tour reports) were given priority with the understanding that the Woodlands Parent Group had an underlying agenda to close the institution. The Maniago fonds offer a unique and valuable perspective into Woodlands as commonly the main voices being heard are of the staff and residents, therefore adding the parent activist perspective adds another dimension to the narrative.

Particularly interesting within the Maniago fonds are the notes from two tours of Woodlands that some members of the group took in August of 1976. The notes themselves are short, probably quickly jotted down during the tour, but their focus is directed at the treatment of residents and the overall condition of the institution. There are some scenarios in which residents are witnessed as being unsupervised or potentially neglected, although because there is no added explanations or follow-up report, there is not a direction on The note-taker recorded which wards

and residents had pictures on their walls, personal bedspreads rather than those of the institution, and other personal items. They paid close attention to how staff interacted with residents. For the most part staff were very aware of the tour members and their observational gaze, but there are instances in which language and actions towards residents are nonetheless condescending and curt. These documents show the note-taker as a critical and unsympathetic observer.

The Woodlands Parent Group took on the complicated task of trying to convince the British Columbian government to change its policies and move from institutionalized care to community-based care for people with disabilities. While all the members of the Woodlands Parent Group were heavily concerned about the care and wellbeing of their children, a clear division formed within the group when thinking about their long-term goal. “Institutional parents” were focused on improving the conditions within the institution, particularly improving the building and the equipment available to the children. On the other side were the “community parents” who were focused on getting their children out of the institution and into community-based living situations rather than dumping more money into an institution which they felt did not work for its residents.¹⁰ This division within the parent members caused tension, but the main short-term goal was to address the immediate concerns and care of their children, recognizing that there were things that could be done to improve the situation in Woodlands while they worked on changing bigger policies.¹¹

In the 1970s activist mothers of children in institutions were beginning to form friendships like Jo Dickey and Jackie Maniago, another Woodlands School parent, who then helped establish the Woodlands Parent Group. In Michelle Panitch’s *Disability, Mothers, and Organization* she interviewed three influential women from different parts of Canada, which she

¹⁰ Panitch, *Disability*, 64.

¹¹ Panitch, *Disability*, 102.

calls “accidental activists,” all of whom were heavily involved in the push towards deinstitutionalization. Through these women, Jo Dickey, Audrey Cole and Paulette Berthiaume, Panitch examines the greater timeline and intricacies involved in the establishment of their foundations and parent groups. Additionally, Panitch looks at how each mother came to activism, which in each case stemmed from their children’s initial diagnosis with a disability. These women felt that the needs of their children were not being met within the institution, and they agreed that in order to improve the situation they needed to go to the government, specifically the Minister of Human Resources, and advocate for their children.¹² Panitch ultimately examines how gender impacted the women in their role as activist mothers. None of the three women accepted the idea that what they were doing was political. Jo Dickey described her action as merely something that she was doing for her son.

Panitch’s work builds on the scholarship of Nancy Naples and her work on “activist mothering” which looks at how women as mothers, especially mothers of children with disabilities, reflect on their activism.¹³ While Panitch’s work examines mothers and activism it is important when looking at an institution like Woodlands to consider the role of special education. Jason Ellis’ *A Class by Themselves?* looks at how children were syphoned into a separate school system on the basis of intellectual and physical disabilities. These facilities, according to Ellis, helped to justify differential education systems, and reinforced the idea that children with disabilities were not suited for mainstream education. Woodlands is another such example of a segregated facility for children, with superficial services aimed at training or educating its young residents. The aim of custodial training schools were to develop the skills of children and young adults in an environment suited to their needs instead of falling through the

¹² Panitch, *Disability*, 66.

¹³ Panitch, *Disability*, 17.

cracks of mainstream educational facilities.

While Jo Dickey's son Drew was admitted to Woodlands in the 1960s as IQ tests were being phased out, it was an IQ test in his early education that labeled him as non-verbal. Dickey described this as a turning point for her son, as it resulted in Drew being moved to a class with non-verbal students and away from his friend group, which caused him a great deal of frustration. In turn he blamed his mother for taking him away from the environment and the people he had become accustomed to.¹⁴

Mothers like Jo Dickey were not against special education per se, although with her pledge to close Woodlands, her intentions have potential to be misconstrued. Dickey's involvement in various parental associations not only demonstrates her dedication to education but more importantly, reveals her concerted attempts to try and get individualized care and education for children with disabilities. For Dickey, it was not just about getting Drew out of Woodlands, although that was largely the catalyst for her activism. Her focus, along with that of the other parents in the Woodlands Parent Group, was to give their children a higher quality of life and maintain their dignity in a community-based setting.

The print media, specifically the Vancouver Sun, served as a catalyst in the creation of the Woodlands Parent Group. In January 1976 a multi-article exposé on Woodlands opened with an alarming headline: "Conditions at Woodlands 'so bad school should close.'" The article referred to a visit from Gunnar Dybwad, a professor of human development at Brandeis University in Waltham, Massachusetts.¹⁵ Gunnar Dybwad, an expert on mental retardation, had been invited to tour Woodlands while he was staying in Vancouver as a visiting professor at the

¹⁴ Panitch, *Disability*, 62.

¹⁵ Gunnar Dybwad also served as the director of a mental retardation project for the International Union for Child Welfare in Geneva.

University of British Columbia. Dybwad's reaction to what he saw at Woodlands was not favourable. Later at a lecture at Vancouver General Hospital Dybwad asked, "how is it possible that in Woodlands you tolerate specific violations of the law which, if this were in a private institution, would close down the institution?"¹⁶ Dybwad's scathing review of Woodlands drew attention to the concerns that the parents of Woodlands residents had already voiced. One of the main issues concerned overcrowding, which plagued Woodlands since the building's opening in 1878 as the Provincial Lunatic Asylum. Dybwad also raised concerns about staffing shortages. Due to the large patient population, staff were not trained to adequately deal with the individual needs of the residents. Instead of placing the blame solely on the staff and administration Dybwad explained, "this is largely not the fault of the institution but the community and of community agencies that reject these children." This statement further fueled the campaigns of the parent group who agreed that these children, their children, should not be confined at Woodlands.¹⁷ Alongside this need, Dybwad stated, "we're dealing, in part, with helpless individuals on whose behalf we must enforce protective legislation."¹⁸ Jo Dickey and Jackie Maniago and the rest of the Woodlands Parent Group took this a step further with the goal of closing the doors of Woodlands for good.

In January 1976, Tim Padmore's article "The retarded have sexual rights" appeared in the Vancouver Sun. In it Padmore recaps another seminar given by Gunnar Dybwad. Padmore reported that the seminar had emphasized that "the mentally retarded have the right to sexual expression, the right to marry and the right to have children," which was not the belief among Woodlands administrators. Additionally, Dybwad believed that there were cases in which

¹⁶ The Vancouver Sun, "Conditions at Woodlands 'so bad school should close,'" *The Vancouver Sun*, January 23, 1976, 1.

¹⁷ The Vancouver Sun, January 23, 1976, 2.

¹⁸ The Vancouver Sun, January 23, 1976, 1.

sterilization was justified, but it was rare and only special cases, while also stating that IQ is not an indication how capable a person is of being a parent, “I know many people of very high intelligence who would make terrible parents and who are far ahead in my mind as candidates for sterilization.”¹⁹

An important part of Padmore’s article examines how Dybwad addressed the ‘folklore’ about mental retardation. Dybwad stated that “many doctors have learned their attitudes from textbooks which illustrate the worst aspects of children with mental deficiencies and from experience in institutions where retarded children have not been given a chance to live up to their potential,” which pushes against the traditional view of that time that ‘feeble-minded’ individuals needed to be in institutions and lack the capabilities to live independent lives. Additionally, Dybwad had pointed out that in institutions people with disabilities are not given an opportunity to fully live up to their potential, especially because of the oppressive nature of the environment. In many ways Dybwad was making claims that activist parents had already complained about, but he brought considerable expertise and authority to the issue by speaking publicly from his position as Director of a mental retardation project for the International Union for Child Welfare in Geneva. His public criticism and significant expertise provided weight to the concerns the Woodlands Parent Group had been expressing and gave evidence to use when advocating for their children.

Anonymous tour notes from August 11, 1976 observe residents watching television, he or she comments on the pictures on walls, notices rooms that feature air hockey games and pool tables. In many ways the observations are favourable, with the institution appearing clean and orderly. One of the main issues that came up in the notes was the use of side rooms. Side rooms

¹⁹ Tim Padmore, “The retarded have sexual rights” *The Vancouver Sun*, January 17, 1976.

were small isolation rooms where staff placed residents for isolation purposes. As the note-taker records when asking staff about the usage of the side rooms, “Dr. Santoro said, ‘side rooms [are] used infrequently – used for punishment or when residents become overexcited.’”²⁰ One note taker recorded encountering one person locked in a completely dark side room, and one resident in another side room playing with a ball. When asked about the girl in the side room playing with the ball, the charge nurse remarked that the girl often went in the side room because she liked it. Afterwards, a staff member went to check on the girl, but did not see if she had wanted to come out, only to check to make sure she was ok.²¹ One other important note in the tour came at the end as the group was leaving, the note-taker mentions that they saw a resident asking a staff member a question and the staff member replying with a harsh “just shut-up and wait.”²²

While these incidents might seem minor and anecdotal it is clear to see why the Woodlands Parent Group had concerns about the institution and the treatment of their children. The use of side rooms might have been more frequently used than staff wanted to admit, but staff may have also justified their use as incredibly helpful when dealing with certain residents or certain difficult behaviours.

During the August 18, 1976 tour of Woodlands, conducted a week after the previously mentioned tour, the anonymous note-taker made similar observations. He or she noticed that some residents had stuffed animals in their rooms, some had their own bedspreads and pictures on their walls, making their rooms more homey, personalized, and perhaps even more comfortable. This portrays a level of autonomy and privilege within some wards as others were stark, only having the basic necessities.

²⁰ Woodlands Parent Group, “Tour of Programme #4,” August 11, 1976, Jackie Maniago Fonds, University of British Columbia Archives, Vancouver.

²¹ Woodlands Parent Group, “Tour of Programme #4,” August 11, 1976.

²² Woodlands Parent Group, “Tour of Programme #4,” August 11, 1976.

The standout sections of this tour revealed moments when residents were unsupervised. The note-taker mentioned walking through a hall and seeing an open door to a washroom and a man sitting on a toilet with no one around.²³ A man sat in a wheelchair outside on a porch with a sheet folded on his lap but was otherwise naked.²⁴ There was also a man alone in the hall, strapped to his bed and had lacked attention for an unknown amount of time.²⁵ And finally, an observation stemmed from seeing a child around 8 years old in diapers alone in a hall.²⁶ No reasons were given in the notes as to why these residents were not supervised, but the understaffing potentially contributed to these scenes. While these situations do not necessarily mean that the residents were neglected, it was these specific observations that they felt were important enough to record. They might have witnessed other situations that in the context of the institution were considered normal, but the noted situations stood out to the note-taker within their tour.

One other section of the tour that gives further insight into the potential mentality of the staff was an instance when a member of the tour pointed out that a staff member was referring to residents all as “kids.” The note-taker records that the residents in this area ranged from 12-20 years old and technically were not kids. The staff member replied, while a resident stood beside them, “chronologically they are young adults but not psychologically. They are all emotionally disturbed.”²⁷ Whether or not the staff member understood the generalization about the residents can only be assumed, but this moment demonstrates a lack of tact during a tour that had the institution under the magnifying glass of the Parent Group. In response to the constant requests

²³ Woodlands Parent Group, “Observations While on Woodlands Tour,” August 18, 1976, Jackie Maniago Fonds, University of British Columbia Archives, Vancouver.

²⁴ Woodlands Parent Group, “Observations While on Woodlands Tour,” August 18, 1976.

²⁵ Woodlands Parent Group, “Observations While on Woodlands Tour,” August 18, 1976.

²⁶ Woodlands Parent Group, “Observations While on Woodlands Tour,” August 18, 1976.

²⁷ Woodlands Parent Group, “Observations While on Woodlands Tour,” August 18, 1976.

for tours of Woodlands, Dr. Pauline Hughes, Woodlands' manager, sent out a letter to the Parent Group stating that they would no longer be accepting requests for tours of Woodlands and that they could come to their open house day to tour the institution. While visitors were allowed at Woodlands, opportunities to observe classrooms, programs, and the rest of the building were only available during guided, curated, tours.²⁸

In November 1976, as a response to the tours of the institution, Woodlands Parent Group prepared a letter to William Vander Zalm, the provincial Minister of Human Resources, expressing their concerns about the conditions at Woodlands. The group believed that, “the institution is archaic both in its physical structures and its philosophy,” which essentially sums up why they were lobbying so hard for deinstitutionalization.²⁹ The letter contained general observations about the outdated conditions and operations at Woodlands, along with short term concerns about staffing shortages and lack of adequate training. It went on to describe long-term concerns that ranged from upgrading the existing programs and facilities, to more radical solutions that involved moving residents out of the institution and into community-based services and programs.³⁰ The parents also mentioned the growing support for the contemporary concept of “normalization”:

...in essence necessitates decentralization of facilities and the consequent phasing out of institutions; a direction toward the community rather than isolation; and fundamentally a belief that retarded people are not more set in a preconceived mode than any other person. Retarded people are more capable of “normal” experiences than was understood at the time the “Woodlands concept” was developed.³¹

²⁸ Pauline Hughes, Letter to Parents Group, March 15, 1978, Jackie Maniago Fonds, University of British Columbia Archives, Vancouver.

²⁹ Woodlands Parent Group, Letter to William N. Vander Zalm, November 3, 1976, Jackie Maniago Fonds, University of British Columbia Archives, Vancouver.

³⁰ Woodlands Parent Group, Letter to William N. Vander Zalm, November 3, 1976, Jackie Maniago Fonds, University of British Columbia Archives, Vancouver.

³¹ Woodlands Parent Group, letter to William N. Vander Zalm, November 3, 1976, Jackie Maniago Fonds, University of British Columbia Archives, Vancouver.

Normalization challenged the very notion that residents were emotionally disturbed, and with it, the corresponding treatments, including the use of isolation side rooms or unsupervised time spent alone. Additionally in the letter the parents address that the system in which Woodlands was created, and the initial model of the 1878 asylum, was built on a certain understanding about madness and isolation, one that evolved through the scholarship but did not within the institution.³² This letter indicates a turning point in the history of institutionalization as the parents of Woodlands residents recognized the greater issues at play and began rejecting the traditional ideas that people with disabilities should be segregated in institutions under the assumption that it was for their own good. The tours of the institution, the Dybwad lecture, along with other scathing articles written by Tim Padmore for the *Vancouver Sun* all helped to bring considerable public attention to Woodlands and its activities.

1976 saw a continued criticism towards Woodlands, this time from the public, specifically a concerned parent in response to Tim Padmore's articles. In a February 1976 issue of the *Vancouver Sun* a mother, Mrs. J Wilson, wrote a letter to the Editor, where she expressed her anger over the Padmore article about Woodlands School. She wondered if Dybwad considered how the parents of Woodlands residents would react to his lecture on the institution, considering the harsh criticisms that he gave and the absence of corresponding solutions. She claimed that his generalized statements about Woodlands were irresponsible as he did not explain himself past the idea that Woodlands was suffering from multiple violations. This vagueness had the potential to be very concerning to the parents and families of residents currently at Woodlands. She explained her son went to Children's Hospital frequently and was thankful for the care that her son received.

³² Woodlands Parent Group, letter to William N. Vander Zalm, November 3, 1976, Jackie Maniago Fonds, University of British Columbia Archives, Vancouver.

While Mrs. J Wilson was quick to praise the staff, administration, and other care workers in hospitals and institutions, she also admitted that, “Woodlands is an old, worn-out hospital that has had all kinds of work done in it, and to it, over the years to try to bring it up to date. Until such time as it can be torn down and rebuilt (perhaps in cottage-type facilities) not much can be done in that regard.”³³ Mrs. J Wilson’s response offers insight into the public opinion of institutions and hospitals. Her experience is not repeated elsewhere in the media on this matter, but it nonetheless reinforced the idea that people outside of the institution recognize it is an outdated system. The hospital for sick children might have fared better compared to Woodlands as it was not a residential facility and was used by and accessible to the general public, which gave it a greater importance to the surrounding community than an institution like Woodlands. She further recognized the difficult situation that doctors, administration, and care workers were in considering the lack of available trained staff, yet, like Dybwad, she did not offer any clear solution. The lack of clear alternatives or initiatives remained part of the public conversations, while Parent groups began organizing for direct action.

While there was an increased public interest surrounding the conditions at Woodlands with the public coverage of Dybwad’s lectures, the response from Woodlands was minimal. In another Vancouver Sun article from January 1976, “Woodlands school defended,” Hazel Davy, Woodlands’ principal, rejected Dybwad’s description of how Woodlands was run. She thought, “it was very unethical of him to take a quick look and then make such comments,” after a single tour of the facility.³⁴ Additionally, she thought his report could have solely been created from assumptions; even though he was an expert in his field, he was not an expert on Woodlands.³⁵

³³ Mrs. J Wilson, “Letters to the Editor” *The Vancouver Sun*, February 18, 1976.

³⁴ The Vancouver Sun, “*Woodlands school defended*,” *The Vancouver Sun*, January 24, 1976.

³⁵ The Vancouver Sun, “*Woodlands school defended*,” *The Vancouver Sun*, January 24, 1976.

Davy did eventually admit that, “sure, we’d like to have more programs, but I don’t think it’s half as bad as he made out,” which adequately sums up the general messaging from Woodlands at the time - it was bad, but it could be worse.³⁶

Reporter Tim Padmore took a tour of Woodlands to see for himself, which resulted in the February 1976 half-page article in the Vancouver Sun, “Inside Woodlands: Smiling faces and more than a little misery.” This article, like Dybwad’s lectures, gave the public an inside look at Woodlands. The title already hinted at the article’s conclusions. Print media was largely the way in which news was delivered to the public on a daily basis and adding his own personal insights on Woodlands would only increase the interest in his articles. His article includes dismal descriptions of Woodlands: “nine narrow beds crowded together with barely enough room to pass,” “a stark room with paint chipped off the walls,” and “on a cot in a corridor, a hydrocephalic child, strangely beautiful despite her enormous swollen skull,” while also mentioning the nearby, “high grey walls of the B.C. Penitentiary.”³⁷ These features all added to the hardened institutional narrative. While Padmore points out that there was also “smiling faces, remodelled, brightly painted residences and eager staff” the optimism gets buried under all the sensational images that accompanies the article.³⁸ Padmore’s language when referring to one of the residents is revealing. He describes “a young victim of cerebral palsy in a wheelchair” which shows an underlying belief towards people with disabilities.³⁹ The use of “victim” perpetuates the notion and ‘folklore’ that people with disabilities are at a disadvantage and that something has happened to them, rather than their disability is simply a part of who they are. During

³⁶ The Vancouver Sun, “*Woodlands school defended*,” The Vancouver Sun, January 24, 1976.

³⁷ Tim Padmore, “Inside Woodlands: Smiling face and more than a little misery,” *The Vancouver Sun*, February 10, 1976.

³⁸ Tim Padmore, “Inside Woodlands: Smiling face and more than a little misery,” *The Vancouver Sun*, February 10, 1976.

³⁹ Tim Padmore, “Inside Woodlands: Smiling face and more than a little misery,” *The Vancouver Sun*, February 10, 1976.

Padmore's tour of Woodlands Dr. Pauline Hughes provided an eerily similar response to Hazel Davy regarding the conditions at Woodlands. She explained, "Institutions for retarded have been notoriously dreadful and this one is not much more dreadful than others in North America. But as a facility for human beings there is lots of room for improvement," which echoes the sentiment that it is not that bad, but for whom?⁴⁰

Tim Padmore's articles were heavily critical of Woodlands, making little attempt to highlight the complexity happening within the institution. From reading the tour reports, the notetaker recorded that there was an increased personalization happening within wards, showing a level of autonomy. Dr. Hughes recognized the need for improvements, but that does not mean that the conditions within Woodlands were unlivable. The Woodlands Parent Group in their tours also recognized that there were efforts to personalize wards, taking steps to make the institution more comfortable for residents. Padmore's one-sided view of Woodlands only confirms the narrative that was given to the public rather than hearing from nurses and residents, the ones who lived through the day to day practices. Padmore built off the narrative of Dr. Dybwad without factoring the complex underlying issues that were the focus of the Parent Group's work.

The Woodlands Parent Group recognized that the government was not making changes, and neither were the staff or administration within Woodlands, and parents were left with no choice but to pursue those changes themselves on behalf of their children and the rest of Woodlands' residents.

Jo Dickey did not set out to be an activist. She just wanted the best for her son. The same was true for the other members of the Woodlands Parent Group. They had seen their children enter Woodlands and regress rather than develop. Parents recall feeling helpless and angry, but

⁴⁰ Tim Padmore, "Inside Woodlands: Smiling face and more than a little misery," *The Vancouver Sun*, February 10, 1976.

many decided early on that they must “resist all urges to become shouting, placard-carrying marchers” as the results would only be minor and temporary.⁴¹ It was important for the group to aim for the long-term goal of closing Woodlands. While it was not necessarily the goal of every parent in the group, especially the “institution parents” it was clear that in order to make progress they needed to have a clear plan and to resist the urge to act out towards the institution.⁴² They also agreed not to direct their anger at the staff members. This decision was important because their children were still in Woodlands and they relied on the staff to take care of their children. Moreover, some had a fondness for staff members who cared for their children.

The group as a whole recognized that some of the problems did not result from individual staff members, nor was it the product of collective staffing issues. Parents, even the “institution parents” readily recognized that the institution was extremely understaffed. Instead they coalesced around the very concept of the institution, and eventually came to appreciate that no amount of staffing changes could address the core problems, which lay at the heart of institutionalization itself. Parents often recognized that staff were arguably doing their best in a highly frustrating situation. That being said, the safety and wellbeing of the children inside of Woodlands was a higher priority for the group than not ruffling feathers among the staff.⁴³ It was important to be strategic with their approach to staff as their children were in their care and already being aware of instances of abuse, there was a potential that if they lashed out at staff, staff may lash out at their children. They also knew that the goal of seeing the closure of Woodlands threatened the employment of Woodlands staff. The Parent Group had many reasons as to why they needed to be on good terms with the staff, most significantly to ensure the safety

⁴¹ Woodlands Parent Group, “Woodlands Parent Group, Vancouver, British Columbia,” Jackie Maniago Fonds, University of British Columbia Archives, Vancouver.

⁴² Woodlands Parent Group, “Woodlands Parent Group, Vancouver, British Columbia.”

⁴³ Woodlands Parent Group, “Woodlands Parent Group, Vancouver, British Columbia.”

of their children as much as they could.

Instead of immediately lobbying for the closure of Woodlands, the group decided on a two-part policy. The larger goal remained the development of community-based services, but the Parent group recognized that this took time, especially with the plan that they proposed for a five-year phasedown for Woodlands. For the shorter term the parents' group focused on what they could do within Woodlands. This meant helping to meet "immediate individual needs" of residents still in Woodlands through advocating for individualized programs, using a surrogate parent system when necessary for residents who did not have accessible family.⁴⁴ The Parent group felt that it was better to put their energy into addressing individualized care rather than use funds to repaint wards which was not necessary or helpful despite it being used as an attempt to humanize the institution.⁴⁵ The Parent group debated these policies, especially when in 1976 the government offered to direct two million dollars to Woodlands. This offer revealed deep divisions within the parents group. Members like Jo Dickey wanted to decline the offer as they did not want to continue to support the concept of the institution but instead focus on getting people with disabilities back into the community.⁴⁶ Ultimately, in a bold move the group turned down the money, stating "we're sorry, we thank you very much, but we don't want it. We don't want you spending money on a concept that cannot work."⁴⁷ Dickey later reflected on that time and how she was "panic-stricken" after turning down the significant amount of money for Woodlands, even though she knew it would not have helped them to obtain their goal.⁴⁸ After turning down the money the group was asked what they wanted and they further pushed for the

⁴⁴ Woodlands Parent Group, "Woodlands Parent Group, Vancouver, British Columbia," Jackie Maniago Fonds, University of British Columbia Archives, Vancouver.

⁴⁵ Woodlands Parent Group, "Woodlands Parent Group, Vancouver, British Columbia."

⁴⁶ Woodlands Parent Group, "Woodlands Parent Group, Vancouver, British Columbia."

⁴⁷ Panitch, *Disability*, 67.

⁴⁸ Panitch, *Disability*, 151.

shift to community-based services. They developed a proposal and by the next year the government approved it in the report “Project Life—Living Independently for Equality,” stating their commitment to closing all the institutions in British Columbia in the following ten years.⁴⁹⁵⁰

The reaction by mothers sometimes backfired. Mothers who rejected institutional care for their children risked being labeled themselves as hysterical, overbearing, and most often, “bad mothers.”⁵¹ The idea of “it’s for their own good” was ever-present, Dickey remembered, “everybody tried to sell it that way, I don’t know how many times my doctor told me I should put Drew in an institution. I know he was thinking of me. He thought it was such a burden,” which was a very common belief at that time.⁵² There were clearly not enough community resources for Drew, especially as his behaviour became more aggressive, but Dickey continued to reject the advice that the institution was the best or only option for her son.

Activist mothers like Dickey resisted the labels and blame that socially stigmatized mothers of disabled children. Not only did they reject the idea that they were “bad mothers” or “trouble-makers” but these mothers were helping to redefine what it meant to be a “good mother,” in a manner that moved against the grain of child psychology and pediatric care advice. Mothers of children with disabilities were heavily criticized with multiple layers of blame stemming from having a child that was not born healthy.⁵³ This broke down into sections around prenatal, emotional, psychological, biological, selfishness, and aggression.⁵⁴ During this time the instinct was to place blame on mothers not fully understanding the science behind the disabilities and the complexity of genetics and their influence on the development of a fetus. Because of

⁴⁹ Panitch, *Disability*, 67.

⁵⁰ Val Adolph, *In the Context of Its Time* (Victoria: Govt. of British Columbia, Ministry of Social Services, 1996), 110.

⁵¹ Panitch, *Disability*, 63.

⁵² Panitch, *Disability*, 85.

⁵³ Panitch, *Disability*, 19.

⁵⁴ Panitch, *Disability*, 19.

these timely assumptions, Dickey experienced this criticism first-hand in her community, for being a mother of a child with a disability, on multiple occasions when Drew was younger, she was frequently asked to leave stores and even church because Drew was making too much noise.⁵⁵

Panitch found in her study of the three activist mothers that overall the fathers of children with disabilities had a much lower expectation for involvement and did not receive the same negativity as their wives did. While Dickey always referred to members of the parent group as “families” or “couples” it was obvious that the mothers were more involved and were the core of the group.⁵⁶ For men their activism on behalf of their children was considered above and beyond, it was not expected of them and they were praised when they did.⁵⁷ The Woodlands Parent Group consisted predominantly of women, which further reflects the contemporary notion that mothers took on a greater role in the advocating for their children and, ultimately, in lobbying for the closure of Woodlands.

Jo Dickey did not believe that gender discrimination was necessarily part of the activism organized by the Woodlands Parent Group, but she recognized and felt uncomfortable when there were meetings in which she was the only woman present.⁵⁸ The heads of organizations and government officials were mostly men, which was intimidating for her and the other mothers, especially since the women’s backgrounds were not political and they were learning how to advocate in a world that was completely new to them when it came to politics and administrative boardrooms. They felt that they needed to behave appropriately, so as to not be the subject of ridicule due to their inexperience. Panitch reflects on the extra burden of being an activist

⁵⁵ Panitch, *Disability*, 154.

⁵⁶ Panitch, *Disability*, 157.

⁵⁷ Panitch, *Disability*, 153.

⁵⁸ Panitch, *Disability*, 86.

mother, as “they carried a disproportionate burden of responsibilities because of the gendered division of labour inside the home which constrained their opportunities for organizational involvement.”⁵⁹ Along with the social stigma and the subsequent underlying guilt, activist mothers were required to uphold the responsibilities put on them by traditional gender roles within the home, which they followed then into public interactions.

Being a “good mother” was not a simple set of options when it came to decide what course of action to take in supporting a child with a disability. Mothers of disabled children were already considered bad or tainted due to the relationship or proximity to disability, but it was an era when a maternal absence was seen as quite detrimental.⁶⁰ In Jo Dickey’s case she initially wanted to have Drew at home and had applied for \$7,600 in funding a year to have an aid come to her home to help.⁶¹ That request was denied, even though she found out that it cost \$70,000 a year to keep Drew in Woodlands.⁶² Despite Dickey’s not wanting her son in an institution she was also told that her doctor was insistent that Drew be put in an institution for his own good. This recommendation combined with the initial maternal guilt over possibly giving their child the disability was a lot for mothers to have to wade through.

The “institutional dilemma” involved more than just parents of institutionalized children. If Woodlands closed, then the children still in their homes or in different programs would also be affected by the outcome. There was a great deal of fear on the part of the parents with disabled children in the community. Their greatest concern was over the potential loss or decline of funds they were currently using to support their children.⁶³ Dickey was elected to chair of the British

⁵⁹ Panitch, *Disability*, 86.

⁶⁰ Panitch, *Disability*, 63.

⁶¹ Panitch, *Disability*, 63.

⁶² Panitch, *Disability*, 63.

⁶³ Panitch, *Disability*, 107.

Columbia Association for the Mentally Retarded. She noted that she felt an unspoken superiority from the Provincial Board members and social stigma on the part of parents who chose not to put their children in institutions.⁶⁴ Dickey suggests that some parents considered themselves better than others because they had not chosen to give up their children to an institution, “I’ve never felt so abused in my life as when we went around telling people we were going to close the institution.”⁶⁵ On the other hand, Woodlands parents feared the closure of the institution without adequate supports for them in the community.⁶⁶ The only thing worse than their child being in Woodlands would most likely be their child being forced to come back to a home where the families were not equipped to take care of the child. Dickey recalled a conversation she had with Jackie Maniago, “[Jackie] thought this was the end of the world, her world, she was so afraid of her son coming home. If it closed, what was she going to do? And that’s what most families felt.”⁶⁷ These were legitimate fears as many parents sent their children to Woodlands as a last resort because they could no longer handle their children or provide the necessary care themselves.

Gunnar Dybwad’s 1976 lecture shook up how the public viewed institutions like Woodlands School. As it made headlines, the situation at Woodlands came under questioning/public scrutiny, but like many news stories the concerns about Woodlands quickly got cycled out and forgotten. This was not the case for mothers like Jo Dickey and Jackie Maniago who were ignited by the Dybwad lecture and used its momentum to forge the Woodlands Parent Group. At the height of institutionalization, it was the parent group that pledged to make changes in order to allow their children to get the care they deserved while also

⁶⁴ Panitch, *Disability*, 65.

⁶⁵ Panitch, *Disability*, 65.

⁶⁶ Panitch, *Disability*, 109.

⁶⁷ Panitch, *Disability*, 66.

maintaining dignity and rights for children with disabilities. The goal of closing Woodlands was significant and daunting for women who had never stepped into the political realm, yet they were determined that a shift to community-based services was the only option that should be available to people with disabilities, which included at times keeping their children at home. The institutional model which served as the basis of Woodlands School that dated back to its origins as an asylum was archaic and prison-like, according to both the parents.⁶⁸ The institution model was not beneficial or adaptable for caring for people with disabilities. According to Panitch, the Woodlands Parent Group pushed against gender discrimination, “mother blaming,” and the psychological sciences that encouraged them to relinquish care of their children to other experts. Though the work of the Woodlands Parent Group is not without its faults, it helps to demonstrate the power of a grassroots movement of parents at a time when institutionalization of their children was in many ways the only option. Parents’ role in agitating for deinstitutionalization was significant.

The refusal of the two million dollars by the Parent group was a turning point in their fight to close the institution. The government had pledged to close British Columbia’s institutions in the next ten years. The influence of Jo Dickey and the Woodlands Parent Group affected change in their community, not only through the Parent Group but also through their commitment to the Community Living Society, the BC Association for the Mentally Retarded, and working with the government and Woodlands staff in order to close the chapter on institutionalization within British Columbia in favour of independent community living.

⁶⁸ Woodlands Parent Group, Letter to William N. Vander Zalm, November 3, 1976, Jackie Maniago Fonds, University of British Columbia Archives, Vancouver.

Conclusion

"We want to live in the future, we don't want to live in the past. With it gone, the people will say, 'Now we can live in peace.'" – Richard McDonald¹²

"It'll put the horror and the memories in the dirt where they belong."
– Carol Dauphinais³

In October 2011, fifteen years after Woodlands' closure, its last remaining structure, the tower centre block was demolished. Since its closure the building had been vacant, the majority of it having been demolished in 2008 after a fire. The fire was suspected to have been started by squatters. For the next three years the tower centre block, part of the original 1878 lunatic asylum, stood as the only visible Woodlands legacy on the New Westminster landscape.

At the demolition Carol Dauphinais stood alongside other survivors as the excavator tore through the building, its walls crumbling under the force. "To me, it's a triumphant moment," Dauphinais told the media, "when they get rid of that place, and do not allow any other places to be built, and just slam abused children anywhere they want."⁴ Dauphinais' sentiments echoed those of others who had gathered to see the end of Woodlands School. Another survivor, Richard McDonald, recalled being in isolation for three months when he was nine years old after contracting measles, chicken pox, and then the flu.⁵ The stories of survivors are numerous, mixed with the frustration of the ever-looming bid to obtain compensation for all the survivors of Woodlands.

¹ Tamsyn Burgmann, "Survivors Of Notorious B.C. Mental Hospital Witness Its Demolition," (Huffington Post, October 18, 2011).

² Richard McDonald was a resident and survivor of Woodlands School. McDonald's quote comes from October 18, 2011, the day that the last section of Woodlands, the centre block, was demolished.

³ Tamsyn Burgmann, "Survivors Of Notorious BC Mental Hospital Witness Its Demolition," (Huffington Post, October 18, 2011).

⁴ CBC News, "Last Woodlands School Building Facing Demolition | CBC News," CBC News (CBC/Radio Canada, October 19, 2011).

⁵ Tamsyn Burgmann, "Survivors Of Notorious BC Mental Hospital Witness Its Demolition," (Huffington Post, October 18, 2011).

Residents' lives did not end with Woodlands' closure nor did their stories. As of 2019 a second wave of compensation payments was approved by the government. A one-time payment would be given to Woodlands survivors, like Carol Dauphinais, who had previously been denied compensation due to their residence being prior to the 1974 cut off.⁶ While changes in compensation are a step forward for Woodlands survivors, it is hard to know how many of those pre-1974 residents have passed away during the process to obtain proper compensation for the abuse they endured. The population of the remaining Woodlands survivors is aging, especially in the almost twenty-five years since its closure. This means that those narratives, like Dauphinais' are and will continue to disappear. Because patient records are only accessible to patients due to confidentiality, the experiences and stories of former Woodlands residents continue to be silenced.

Another act of remembrance, one that focused more on those who passed away rather than the survivors was the community-driven creation of Woodlands Memorial Gardens. In 2007 at the site of the old Woodlands Cemetery, former residents, families, and volunteers came to the opening of Woodlands Memorial Gardens. After eight years of planning and preparing, the gardens finally opened to the public. The history of the cemetery is equally as complex as the institution itself. Having closed in 1977, the majority of the headstones for the over 3,000 people who were buried in the cemetery were dug up.⁷ Some of the headstones were stacked away in a shed, while others were used to build a retaining wall behind the institution near a ravine. Staff had also used headstones to build a patio to have barbecues on. There were also incidents in

⁶ Catherine Urquhart, "Decades after Its Closure, Survivors of Abuse at Woodlands Receive Compensation," Global News (Global News, October 9, 2018).

⁷ Ministry of Labour and Citizens' Services, "Woodlands Memorial Garden Officially Opens," News Release, (Ministry of Labour and Citizens' Services, June 22, 2007).

which Coquitlam residents found headstones used as stones in their driveways.⁸ The reason for the removal of the headstones stemmed from the opening of Queen's Park Hospital next door. Because the population at the hospital was aging, they did not want the elderly patients to look out the window and see the cemetery.⁹ The goal of the garden project was to "bring life back to a long-forgotten graveyard by repatriating headstones that were stripped from the site to hide its existence."¹⁰ Woodlands Memorial Garden is now the sole physical remnant that recognizes the institution's footprint within New Westminster. Where the institution once stood, alongside the Fraser River now features multiple condominium complexes.

This thesis aimed to show the complexity of Woodlands School, an institution that was built for adults suffering from madness. Its initial structure, physically and internally were not created for children, especially not ones with various disabilities. The theory surrounding disabilities and psychiatry evolved greatly during the operation of the asylum creating an ever-shifting standard of care for administration and staff. In many ways Woodlands failed to provide the safety and security to its young residents, yet the institution as a whole did provide a place where parents could take their children with disabilities that was often better equipped than their family home. Because of the diversity in the residents and their backgrounds, it cannot be said that Woodlands was not beneficial for some residents. For residents like Carol Dauphinais, her experience at Woodlands was at times problematic, yet her initial homelife was a source of trauma and detrimental. Each resident's story is different and requires nuance to understand how it fit within Woodlands. From McCallum's reports there was a genuine care put forth by staff towards the residents but different factors, such as a lack of training, adequate ratios, and

⁸ Robin Laurence, "Woodlands' Lost Found Again in Dead and Buried" (The Georgia Straight, April 3, 2014).

⁹ Mark Hume, "Giving Dignity to the Dead B.C. Tried to Hide from View" (The Globe and Mail, April 22, 2018).

¹⁰ Mark Hume, "Giving Dignity to the Dead B.C. Tried to Hide from View" (The Globe and Mail, April 22, 2018).

stability created unsafe circumstances for everyone.

The concern for the wellbeing of residents was present within the staff and also within the families that followed the belief that Woodlands was the best place for their children. When it became apparent to families that the institution as a whole was not, and would not, function with the best interest of their children in mind with the outdated institutional structure the Woodlands Parent Group formed. Their recognizing the need for collaboration and cooperation with the Woodlands staff factored greatly in their successful contribution to closing Woodlands. The Woodlands Parent Group was unique in being able to put external pressure on the government when the internal dissatisfaction within Woodlands was not enough to incite change.

The history of Woodlands School was multi-faceted and complex from the initial construction to its demolition over a hundred years later. While Woodlands shares commonalities with custodial training schools across Canada, it is unique in the perspectives and activism that occurred during its operation. Woodlands was a product of its time hindered by political and financial strain which made it increasingly difficult to provide consistent care and to do the work to improve upon itself.

External forces were frequently the cause of attention and changes associated with the institution tended to be driven by external forces. It was typically after an incident at Woodlands was made public, the government extended/offered temporary attention to problems within the institution. Because the institution was not financially lucrative for the government, there was little incentive to focus on their issues. While there was considerable concern expressed by staff through the years, staff members had little to no power in acquiring necessary resources for patients or improving wide-scale problems. For some Woodlands was a safe institution for children with disabilities to be cared for and provided with individualized education. But for

many residents they were the recipients of the institution's failures.

A lack of preventative foresight hindered the development of the institution and contributed to the compounding problems that plagued it throughout its years. The government built the institution out of obligation after the bitter rivalry for the province's capital with Victoria and not out of the moral duty to care of its citizens. Effort was put into the institution during its operation, yet it not enough to allow Woodlands to live up to its potential in protecting and caring for children with disabilities. The voices that continue to bring Woodlands to the attention of the public are former residents and survivors, and their families who do not want the fraught history of institutionalization in the province to be buried and forgotten. These complex intertwined narratives are necessary to deconstruct and contextualize the past in order to inform future policies, practices, and to ensure that those who suffered within Woodlands did not do so in vain.

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