

chapter seventeen

“UNFIT” CITIZENS AND THE B.C. ROYAL COMMISSION ON MENTAL HYGIENE, 1925-28¹

Robert Menzies

[T]his mental hygiene movement is a healthy, if precocious child. ... Never has there been so bright a future; never has there been so much encouragement; but never has there been so much need for an intelligent understanding on the part of our average citizen. The public must learn more and more that this is a national aim, and just as the obliteration of tuberculosis, malaria and yellow fever was achieved when they became national conceptions, so the same thing is in the field of mental disorders. More experts are required in the field, and the public must be taught to accept leadership as a duty to society and the state. Mental hygiene must inevitably make its appeal to you and to me, to everyone who enjoys the privilege of a home and who appreciates the full significance of useful citizenship.²

A Commission is Launched

In Victoria on the afternoon of 18 November 1925, the Honourable William Sloan, Provincial Secretary in Premier John Oliver's Liberal administration, rose to address the B.C. Legislature on the vexing subject of mental hygiene. Making the case for appointing a select committee to study “the whole question of the insane and feeble-minded” in British Columbia, the Minister delivered an alarming exposé on the sinister tide of lunacy and deficiency that was swamping the province. Sloan came armed with a battery of statistics and representations from a medley of concerned organizations and citizens. He solemnly reported that the province was at a critical crossroads in its desperate war against a relentless onslaught of defect, disease, and disorder. According to hospital annual reports, the number of institutionalized

insane had mushroomed from 16 in 1872 to 1,884 in 1925. To date, these unsound humans had cost the B.C. taxpayers a stupefying \$10,581,832 for their care and upkeep. Worse still, 70 per cent of psychiatric hospital inmates had been born outside the province. Compounding the crisis was the fact that some 1500 “subnormal and mentally defective”³ children were alive in B.C. and, according to expert calculations, one out of every 285 residents of the province was mentally subnormal.

Rising to the occasion, Sloan stretched for allegories that would aptly capture this lurking calamity. “The farmer,” he intoned, “is careful in selecting the seed whence his crop is to be sprung for he knows that as he sows so will he reap. But in the great field of humanity we are absolutely careless and indifferent and, accordingly, we are reaping as we have sown — a crop of human wastage and human misery.” Who was to blame for this assault on the collective mentality of the province? According to Sloan, it was the “average person” who was accountable — the citizen who “gives little or no thought to the tremendous and vital issue,” who expects the State to pay, seemingly oblivious to the fact that “you and I *are* the State.”⁴ By permitting the mentally unfit to immigrate, marry, and procreate, the people of British Columbia were committing “a sin of omission” that would condemn future generations to untold hardships and abet the propagation of “human derelicts” who were “a liability in peace and a menace in war.” Such indifference to the evils inflicted on modern society by the scourges of insanity and feeble-mindedness was “unnatural, ... unChristian, ... immoral and unhuman.” The only recourse was to reverse this national decline toward oblivion, by acknowledging “our duty to see that we build up a race true to the traditions and characteristics of the Anglo-Saxon.” Luckily, all was not yet lost. “I am convinced,” concluded the suitably exercised Provincial Secretary, “that there are in this House earnest, thoughtful and patriotic men and women who are ready, in the name of morality, to give their every effort and thought to a problem of such vital importance to the future of the race.”⁵

The assembly greeted Sloan’s oratory with a thunderous ovation. The Secretary’s motion to strike a committee of investigation won a quick seconding and avowal of support from Liberal members and physicians E.J. Rothwell and H.C. Wrinch. Rothwell underscored the need to approach the matter of mental affliction through the cool and dispassionate lens of scientific inquiry. “Cut out sentimental wish-wash stuff,” he advised. “It will not get you anywhere.”⁶ Sloan’s resolution passed unanimously.

Within a month, as it became clear that the committee would have little opportunity to act before dissolution of the Legislature, Sloan moved to extend its mandate. Accordingly, on 30 December 1925, the provincial Cabinet

through Order-in-Council⁷ invoked the *Public Inquiries Act* to establish the B.C. Royal Commission on Mental Hygiene (BCRCMH). The Order empowered the Commission to investigate and make recommendations to the Legislature on five core issues:

1. The reasons for the increase in the number of patients maintained in the Provincial Mental Hospital and branches thereof;
2. The causes and prevention of lunacy in the Province generally;
3. The entry into the Province of insane, mentally deficient and subnormal persons;
4. The care and treatment of subnormal children;
5. All such other matters and things relating to the subject of insanity, especially as they affect the Province of British Columbia, as the said Commissioners may deem pertinent to their inquiry.⁸

Thus began British Columbia's grand inquiry, the most comprehensive in the province's history, into the mental makeup of its citizenry. During the two-year lifespan of the BCRCMH, the Commissioners probed and offered their prescriptions on a staggering range of political, medical, and legal problems that were obsessing the province around matters of the mind. Their investigations into mental illness and deficiency would have an enduring impact on state policies and practices. Perhaps even more important, during the mid- and late-1920s the BCRCMH became a lightning rod for official and community debate around myriad questions relating to matters of governance, citizenship, professional power, social justice, and public health.

In this chapter, drawing on the BCRCMH papers, the records and correspondence of government and private organizations, media clippings, scientific journals, popular publications, and secondary sources, I trace the activities of the BCRCMH through this tumultuous phase in mental hygiene history. Following the main themes of this book, I argue that ideas around citizenship figured prominently in health and welfare ideologies and practices that permeated British Columbia, and the country more generally, throughout the inter-war period. In chronicling the Commission's engagement with questions around immigration control, sterilization of the unfit, treatment of the insane, and segregation and training of the feeble-minded, I show how the BCRCMH both represented and fuelled the province's and nation's preoccupations with advancing modern civilization through the manufacture of good citizens and elimination of the unworthy.

Unsuited to Citizenship

As contemporary state officials, political theorists, and human rights advocates grapple with competing conceptions of “the new citizen” as this millennium unfurls,⁹ it is illuminating to note that British Columbians, and Canadians more generally, were confronting similar debates around identity, entitlement, responsibility, and belonging nearly a century ago. For relatively young nation-states like Canada, the years 1900-1925 represented a critical era of transformation. In the midst of tidal transitions in the national and world order, long-held liberal models for managing the relations between government and populace, tradition and progress, private and public, entitlement and obligation were being held up to critical scrutiny. If nineteenth-century ideas about governance had rapidly devolved in the context of fin-de-siècle political culture, they imploded forever in the wake of World War I. As Dowbiggin observes, “once the Armistice was signed, much of the Canadian wartime unity began to unravel. ... Agrarian, labor, and sectional protests spread throughout the country, leading Canadians to long for a rebirth of citizenship and new leadership to help bring it about.”¹⁰

In Canada, as elsewhere, it was the progressive movement that emerged to confront these manifold challenges to the *ancien régime*. A fresh generation of public servants, social engineers, planners, professionals and practitioners came to embrace a reconstructed vision of the body politic. No longer, according to the reformers for this new century, could a liberal state afford to dwell on the periphery of private life. The litany of social problems plaguing civilization — crime, disease, promiscuity, intemperance, disharmony, urban blight, worker unrest, political radicalism — demanded instead an interventionist and far-reaching program of scientific governance. Only by applying enlightened modern theories and methods could a truly moral, civil, patriotic, and industrious society issue forth. The great initiatives in public health, education, housing, labour relations, social welfare, recreation, and parenthood were all part of a wider impetus aimed at radically extending the ambit of state knowledge about, and regulation of, its citizenry. Individual Canadians came to be viewed increasingly as human embodiments of the public regime, as “not merely *constituents* of the state but *constitutive* of the state.”¹¹ The manufacture of good Canadian citizens — virtuous, efficient, and adaptable contributors to public causes — was inseparable from the project of nation-(re)building itself.

But what of those who failed to measure up to the citizenship standards being brandished by the government officials, social reformers, and professional classes of a progressive post-WWI Canada? In particular, how could

authorities contend with the masses of deficient, diseased, depraved, and degenerate beings who were not amenable to assimilation, education, treatment or training into conformity with the Canadian dream? Such unfit Canadians — and would-be Canadians — presented an enduring problem for those involved in the citizen-making business. Their very existence seemed to belie the belief that human beings were infinitely malleable and, therefore, ultimately perfectible.

In retrospect, it is scarcely surprising that early twentieth-century Canadian reformers gravitated so effortlessly toward the "science" of eugenics as a medium for articulating their anxieties.¹² Eugenics offered authorities a powerful set of discourses through which they could attribute the problem of flawed citizens, not to the deficits and prejudices of prevailing political ideas and social programs, but instead to the intrinsic genetic, biological, and cognitive inferiority of alien and subaltern groups who simply had no place in a modern Canada. The defective immigrant, the born criminal, the congenitally feeble-minded, and the hereditary insane became, figuratively and literally, enemies of the nation. Entire projects of identification, classification, exclusion, segregation, and even annihilation developed in science, law, and public policy, with the ambition of purging all traces of these aberrant beings, and the dysgenic germ plasm that they harboured, from the fragile tissue of Canadian society.

The twin perils of irrationality and subnormality were doubly menacing, as they threatened both to invade the nation from without and to subvert it from within. Beyond the national frontiers, as it appeared to many, swarmed untold multitudes of defective beings whose mass entry into Canada would toll a death-knell for the nation's health, welfare, and security. From the turn of the century through to the 1930s, immigration of the unfit remained a fixation among a succession of prominent Canadian medical authorities.¹³ Prior to World War I, physicians were warning civilians that "[i]f in the years to come Canada is to hold its own among the nations ... none should be allowed to enter the Dominion save those who are physically fit to become good and useful citizens."¹⁴ Helen Reid, head of the Immigration Division of the Canadian National Committee for Mental Hygiene (CNCMH), introduced W.G. Smith's well-publicized immigration study by asserting that "Canada cannot have a strong and healthy nation unless its people are mentally as well as physically sound. ... An immigrant with a lame or crippled mind is not a healthy immigrant, nor is he a whole man. Canada needs whole men."¹⁵

Domestically, the principal adversaries were congenitally feeble and deranged minds. A nineteenth-century invention¹⁶ and artifact of the mental testing systems of modern mass education,¹⁷ the feeble-minded subject was

also, like the born criminal, a metaphor for wider trepidations about the instability of social order.¹⁸ Likewise, the spectre of insanity seemed omnipresent as asylums swelled to overflowing and experts singled out heredity as the predominant cause. Insisting in 1921 that “[w]e must set as our objective an aristocracy of mind as the highest ideal of democracy,” McGill University psychologist William D. Tait asked rhetorically, “Am I my brother’s keeper?” The answer, he intimated, was “Yes, by preventing the necessity of calling him a brother, by keeping him in his place if he has arrived, by seeing to it that he does not beget his kind if he is one of the class that are of little use to humanity.”¹⁹ As F.C.S. Schiller added in the *Dalhousie Review*, the very future of the country was at stake:

The license society allows at present to the criminal, the insane and the feeble-minded to multiply at pleasure, and to have their worse than worthless offspring cared for at the public expense ... too much resembles the strange toleration shown by ant-bee-communities towards the moron parasites that infest their nests. ... If civilization is not to be submerged in a flood of congenital feeble-mindedness, there is no time to lose.²⁰

Mental Hygiene in the West-Coast Province

Following World War I, the eugenics cause became inextricably interwoven with the rapidly ascending fortunes of the mental hygiene movement.²¹ This cardinal engine of psychiatric ideology and practice from the 1920s through to the 1950s — this “offspring of a love for the human kind”²² — was a formidable coalition of state authorities and private citizens, politicians and scientists, conservatives and progressives, academics and practitioners. It drew force from the sanguine idea, to quote Beers’ canonical *A Mind That Found Itself*, that “[t]he greatest thing in the world is the human mind.”²³ For professionals who had been confined to the inner wards of public asylums — bearing forlorn witness to the collapse of the great moral treatment campaigns of prior generations — mental hygiene offered an “escape route”²⁴ into a world that beckoned beyond the hospital gates. For psychiatry, long viewed as “the most backward of all branches of medicine,”²⁵ it constituted no less than a window into the twentieth century. Theorists and practitioners of mental hygiene envisioned a utopian future where, through the interventions of modern experts, in close alliance with the managerial state, the mentally deficient and diseased “would all be absorbed into the scientifically system-

atized social order, and be transformed into useful and contented members of society."²⁶ In Canada, this movement came of age in 1918 when the CNCMH formed under the leadership of C.K. Clarke and C.M. Hincks. Through to World War II and beyond, the CNCMH functioned as the nation's single most influential forum for mental hygiene research, government lobbying, policy promotion, and educational propaganda.²⁷

What most distinguished the course of eugenics and mental hygiene during these years was the remarkable ability of these seemingly incommensurable worldviews to co-exist in the thoughts, words, and deeds of scientists, politicians, practitioners, and private citizens. In particular, experts of the mind proved themselves disarmingly adept at negotiating the spaces between destiny and agency, nature and nurture, despondency and hope, biology and mentality, eradication and prevention, expulsion and inclusion in their crusades to uplift the nation's mental health. Eugenicians and mental hygienists found common ground in their mutual allegiances to state and science as the twin instruments of social reform.²⁸ Moreover, exponents of both causes were seldom as philosophically committed as the public rhetoric might have often implied. Across the decades, authorities proved over and over that they felt little constrained by the dictates of ideological consistency.²⁹

In British Columbia, the mental hygiene era had begun with the CNCMH provincial survey of 1919. Based on their searching investigations of psychiatric, correctional, social service, and educational facilities around the province, the CNCMH directors had concluded that "the most glaring need in British Columbia [is] the question of the treatment of acute cases [and] the rights of the insane to early scientific treatment."³⁰ Their report generated what would soon become the standard inventory of mental hygiene prescriptions for "heading off the stream at its source."³¹ For the insane these included psychopathic wards³² at the Vancouver General Hospital, an acute building at the Essondale institution in Coquitlam, more medical staff, a social service unit, a residential nurses' home at the Public Hospital for the Insane (PHI) in New Westminster,³³ voluntary admission provisions, occupational therapy, and a travelling psychiatric clinic attached to the PHI. The feeble-minded, for their part, were in "urgent" need of a training school, better diagnostic facilities, and more special classes³⁴ in the public schools.³⁵ Clarke and Hincks concluded by proposing that "there be appointed a Mental Hygiene Commission in British Columbia," the function of which "would consist in making a careful study of the problem of mental abnormality in the Province, and of developing a suitable plan for its solution."³⁶

The years prior to and following the CNCMH report witnessed an avalanche of mental hygiene policy activity both in Canada and abroad.

Internationally, Britain produced the pioneering 1904-08 Royal Commission on the Care and Control of the Feeble-Minded (and the attendant 1913 *Mental Deficiency Act*).³⁷ Elsewhere in Canada, the Ontario Hodgins Commission of 1919³⁸ recommended, among other things, a provincial board of control and stringent segregation of the feeble-minded.³⁹ In Alberta, a citizens' committee, under the stewardship of Judge Emily Murphy, was conducting its own inquiries into the mental hospitals of that province.⁴⁰ Nova Scotia's Royal Commission Concerning Mentally Deficient Persons, chaired by W.L. Hall, would report to the government there in 1927.⁴¹

In British Columbia, the tempo also quickened. Declaring that "the feeble-minded and the progeny of the feeble-minded constitute one of the great social and economic burdens of our modern civilization,"⁴² B.C. mental hospital superintendent C.E. Doherty (1905-20) and his successor H.C. Steeves (1920-26) pressed for state intervention. The Child Welfare Association of Vancouver publicly lobbied for marriage control and sterilization legislation, along with a custodial school for mentally defective children.⁴³ Women's organizations throughout the province, and especially the Local Councils of Women (LCWs), emulated their counterparts elsewhere in becoming key exponents of reform.⁴⁴

In autumn 1925, Penticton MLA W.A. Mackenzie released his report chronicling the deplorable conditions of overcrowding inside the B.C. mental hospitals.⁴⁵ Mackenzie depicted the PHI as "a rambling structure, mostly of inflammable construction, ill suited and unfitted for the care of the large number of patients - mostly women - confined there." Feeble-minded children at Essondale, he continued, were "in constant danger of being roasted alive. ... These unfortunate sufferers," he admonished his colleagues, "are wards of the Government and the citizens of British Columbia and as such it is a public responsibility to see that they are properly housed."⁴⁶ Simultaneously, anti-immigration agitation also intensified. In November 1925 the Legislature resolved that "in the opinion of this House the strictest scrutiny of all immigrants coming into Canada as regards physical and mental condition be made by the Immigration Department."⁴⁷ A week later MLA Mary Ellen Smith followed suit, opining to her colleagues that, in the absence of immigration control, "we will have our jails, asylums and other institutions flooded with the flotsam and jetsam of humanity."⁴⁸

The BCRCMH at Work

In a bipartisan gesture meant to reflect the gravity of these issues, Provincial Secretary Sloan appointed three Liberal and two Conservative members to

sit on the BCRCMH. E.J. Rothwell, the elected chairman,⁴⁹ had won the New Westminster seat for the Liberals in Oliver's precariously slender election victory the previous June. Born in Ontario, Rothwell had graduated in medicine from the University of Toronto. After six years as a general physician in Trail, he relocated to the Royal City in 1902, where his practice brought him into contact with the nearby PHI.⁵⁰ Probably the most recognizable of Rothwell's co-Commissioners was the secretary, the redoubtable Vancouver Liberal member Brigadier-General V.W. Odlum. A fellow Ontarian by birth, Odlum was a long-time newspaperman who had served in both the Boer and First World Wars and was owner of the *Vancouver Star* between 1924 and 1932.⁵¹ Their Liberal colleague was P.P. Harrison, a Cumberland lawyer who, following his short-lived political career, joined the judiciary and would eventually become a B.C. Supreme Court justice.⁵² Reginald Hayward was a Conservative member from Victoria and former mayor of the capital city.⁵³ The remaining Commissioner, and second Conservative, was W.A. Mackenzie, who had written the report on overcrowding and would later become labour minister in Simon Fraser Tolmie's one-term Tory government.⁵⁴

The first task of the newly-minted Commission was to inspect the mental hospitals at Essondale and New Westminster. The *Vancouver Province* conveyed a blow-by-blow rendition of their visit to the PHI on 11 January 1926. "Hour after hour," the reporter recounted, "the commissioners walked the long corridors leading from overcrowded dormitory to dormitory, where often the beds were separated by only a few inches, and from recreation room to recreation room where hundreds of human beings moved about in objectiveless purpose, or gazed in senseless wonder at the visitors." While the writer stressed that "every effort [was] being made to give comfort and care,"⁵⁵ it was apparent to all present that the resources and living space at both institutions had been stretched beyond toleration.

The members then met to parcel out their respective mandates. Mackenzie would address the matter of overcrowding, Harrison took on immigration, Hayward would delve into heredity, and Odlum would concern himself with "provincial repatriation of the insane." To Rothwell fell the issue of "psychopathic hospitalization with respect to its efficiency in preventing insanity in its incipient phases." Rothwell and Hayward would examine the California situation, and Mackenzie and Odlum would look into the operations in Ontario and Manitoba. Based on their inquiries and observations so far, the five MLAs developed a provisional list of proposals that included a new reception hospital and building for chronically afflicted women at Essondale, abandonment of the wood frame "feeble-minded building" at Essondale and removal of all deficient to New Westminster, appeal to the

federal government for better mental screening of immigrants, an agreement for return of insane persons to their province of origin, legislation requiring mental certificates as prerequisites for marriage, sterilization, a psychopathic hospital in Vancouver, and "subnormal schools for those capable of receiving *some useful instruction*."⁵⁶

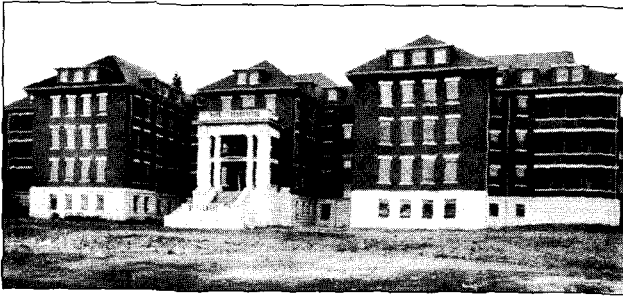


figure 17.1

Rear of
Admitting Building,
Essondale, 1924.

BC ARCHIVES F-04732.
REPRODUCED BY PERMISSION.

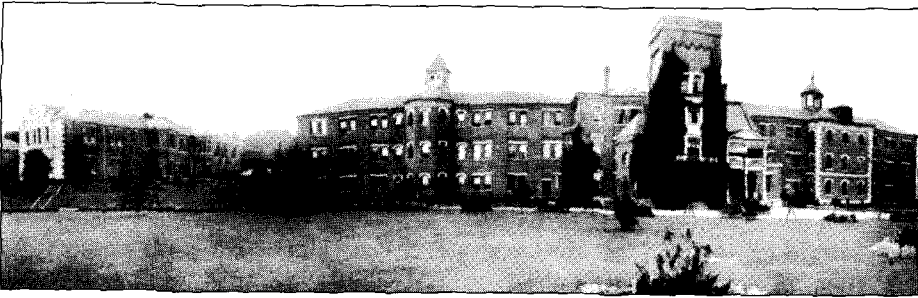


figure 17.2 • Provincial Mental Hospital, New Westminster, 1929.

BC ARCHIVES F-04737. REPRODUCED BY PERMISSION.



figure 17.3

Edwin James
Rothwell, 1914.

REPRODUCED FROM *BRITISH COLUMBIA:
PICTORIAL AND BIBLIOGRAPHICAL, VOL. 2*
(S.J. CLARKE: WINNIPEG, 1914), PAGE 365.

Events unfolded apace through early 1926. The Commission opened its Vancouver offices and recruited J.A. Macdonald, an employee of Odlum at the *Vancouver Star*, as its assistant secretary.⁵⁷ Former publicity commissioner for Manitoba, Macdonald was an outspoken journalist who played a key role over the next two years in administering the inquiry, compiling a research library, and writing the official reports.⁵⁸ Immediately upon taking up the post, Macdonald launched into correspondence with an array of Canadian and international authorities. Meanwhile, the commissioners trained their sights on securing public support for their research and reform activities. Addressing the Victoria LCW in February 1926, Hayward transfixed his audience with accounts of the "idiot and low class imbecile type" children that he had observed in the hospitals, "a hopeless wreck of juvenile humanity, not one of them, who should ever have been born into this world ... some of whom are barely more than mere animals (their only resemblance of being human, is their shape)."⁵⁹

The BCRCMH convened its Vancouver public hearings in the city's courthouse on 13-14 April 1926.⁶⁰ Vancouver mayor Louis D. Taylor gave the welcoming remarks. The internationally renowned Dr. C.B. Farrar, director of the Toronto Psychopathic Hospital and professor of psychiatry at the University of Toronto, was on hand as well. Over the two days of the proceedings, the elite of the Vancouver and Lower Mainland mental hygiene, public health, legal, and social welfare establishments⁶¹ unleashed, one by one, their assorted tales of atrocity.

In the morning of the first day, H.C. Steeves echoed Mackenzie and Hayward before him in deploring the grave overcrowding that plagued his facilities. He pleaded with the government to fast-track plans for the Female Chronic Building and accommodations for the feeble-minded. Reporting that his physicians and staff were overwhelmed by the 135 mental cases arriving annually at their doors, Superintendent F.C. Bell of the Vancouver General Hospital added his voice to calls for a psychopathic hospital. P.D. Panton, Medical Officer of the Vancouver Police Department, offered a similar depiction of conditions at the city jail. Typifying the rabid eugenicist bent of many central Canadian psychiatrists, C.B. Farrar maintained that his colleagues were nearly united in considering that "any measure that could be taken to prevent reproduction of that kind of stock would be the finest thing that society could accomplish." Of particular concern to Farrar was the "intermediate group of higher grade defective." This type "is more prolific than any other group; they are the ones who fill our gaols and penitentiaries. They are in the poor quarters of the city and contribute to the thug and bandit class. ... That is the one group we should get hold of if we are to do anything toward

preventing the accumulation of insanity, of poverty, of delinquents, and all the other tendencies which make for the social diseases.”

When given his opportunity to speak, Vancouver psychiatrist J.G. McKay addressed the question of mental deficiency. According to this future member of the eugenics board, “[h]eredity is paramount. ... There is not a sane man associated with this work who won’t agree with me.” Reminding his audience that “it is an infringement of the law today to let inferior, unregistered stock run loose over the open prairie,” McKay lamented that the regulation of low-quality humans could lag so far behind that of their bovine counterparts. For his part, J. Stuart Jamieson, police magistrate for Burnaby, stated that 40 per cent of juvenile offenders were of mentally defective stock. He offered up the case of an 18-year-old “girl” who had come before him accusing her male guardian of sexual assault. The charges were summarily dismissed, but Jamieson, to his chagrin, had no further power over her. “Now, that girl is a sexual pervert,” he observed, “and she has cunning. ... In time, I feel sure, she will be on the street, and will probably have children. What will they be like? Her sister married a hunchback, and is raising a family who will be 100% feeble-minded and idiots. This type of person drifts into disease, and will likely add to the sum total of those suffering from syphilis.” When queried about what should be done with this woman, Jamieson replied, “Segregation and sterilization. Sterilization would be perfectly safe, and she would be like a harmless child of 12. She could be put in an institution where she could learn something, some handicraft, and she could go out. She would be happier, and would be, more or less as a suitable citizen.”

Against this general torrent of trepidation, however, flowed the testimony of other witnesses who contributed a rather more tempered account of B.C.’s mental problems. For Josephine Dauphinée, supervisor of Vancouver special classes for subnormal children, the image of mental defectives as dangerous untrainables was refuted by the experience, over the previous 15 years, of psychologists and educators. “[T]he majority of morons,” asserted Dauphinée, were “not of that type. ... They can be trained so that they can live in the outside world. We teach them to be punctual, regular, cheerful and establish friendly relations with their fellow men, and good habits, good principles are necessarily associated with the business world.”⁶² Henry Shaw, Juvenile Court judge for Vancouver,⁶³ disputed the notion that most young offenders were biologically inferior: “These boys are for the most part absolutely normal, and their crimes are often deviltry and the result of high animal spirits.” Only 15 per cent of the children appearing before his court could be considered in any way deficient. And even they were, for the most part, redeemable. “The public,” continued Shaw, “should realise that the

boys and girls of today are the men and women of tomorrow." For the feeble-minded child, "training will greatly strengthen his mentality and even render him, at all events, a useful citizen."⁶⁴

Two days later the Commissioners reconvened in Victoria, where another retinue of professionals and social reformers awaited them. On behalf of the Victoria LCW and Social Service League, Emily May Schofield (wife of the capital city's Anglican bishop) recited the list of resolutions submitted by her organization, which included additional special classes for subnormal children, segregation of the feeble-minded and epileptic, relief of hospital overcrowding, and "stricter examination of all intending immigrants at the port of embarkation by doctors who have wide Canadian experience and understand the strain ... which newcomers to this country have to undergo." Her colleague on the LCW, Victoria physician Irene Bastow Hudson, declared herself an opponent of sterilization. When asked to elaborate, she obliged by stating that "allowing marriage after sterilization will create monsters of sex-perversion, and glorify sense gratification, making us and our future race ... lower than the mindless brute creation." As an alternative policy toward the subnormal, Hudson allowed that "[i]f they are a danger to society and liable to reproduce their kind without marriage; if they can't be trained, you must segregate them, and it is an economic impossibility to segregate them all. I think temporarily we might have to descend to the measure of castration."

But the main preoccupation of the Victoria hearings was plainly immigration of the unfit. Dr. Arthur G. Price, the city's medical officer, protested that "Asiatics of low mentality are allowed to come into the Province, and many come from Europe who are undesirable from a mental standpoint." Speaking from his longstanding experience as provincial health officer and B.C. delegate to the Dominion Council of Health,⁶⁵ the imperious Henry Esson Young railed against the "promiscuous power" wielded by self-serving politicians to bypass sound scientific opinion and dilute the national stock through ill-advised admissions of defective aliens. According to Young, the federal government's provisions for screening immigrants on corporal and mental competency had been grievously corrupted by ethnic influence-peddling. In particular, "the Jewish people there are very strong and very wealthy, and they are constantly besieging the Minister to get these people in."

As in Vancouver, despite the overall affinity of witnesses for eugenics-flavoured accounts of deficiency and disorder, the discourse was by no means univocal. On insanity, for instance, Arthur Price professed that "it is not heredity so much as we think." There were, he contended, innumerable sources for mental troubles, including "syphilis, toxin poisoning, injuries. ... poverty and poor living conditions; money losses; lack of work or ability to

work; laxity in the family life, in the home; lack of control in the home and the uncontrolled desires of youth." For Victoria Medical Association representative E.M. Baillie, too, heredity was "allowed to play too great a part." On the subject of eugenic sterilization, even the otherwise zealous Young voiced his distaste except in the most "obvious" cases: "I don't believe in it ... In sterilisation you want to get rid of the recessive dormant seed; it would take eight thousand years to reduce it to 1%; at present it is 7%. There are cases that are not so obvious; where can you draw the line?"⁶⁶

After the close of hearings, the Commissioners spent the remainder of 1926 undertaking their studies of selected mental hygiene issues,⁶⁷ communicating with consultants, and preparing their interim report to the Legislature. After relocating to Victoria in May, J.A. Macdonald commenced an ongoing correspondence with C.M. Hincks.⁶⁸ In July, the CNCMH medical director offered a typically loquacious letter that revealed some of the shifts in perspective taking place among the psychiatric elite during this pivotal period in mental hygiene history. Hincks was now persuaded that at most 50 per cent of mental deficiency cases were hereditary in origin — a quite spectacular revision downward from the 90-per-cent figure that was commonplace just a few years earlier. The emphasis in the field, according to Hincks, must now be on prevention. While he was careful to append "careful immigrant selection, and, perhaps, sterilization" to his list of prescriptions, Hincks was now accentuating wider programs of community interventions "by establishing Psychiatric or Habit clinics, by introducing mental hygiene into schools, by parent education [and] by incorporating mental hygiene in public health and social service endeavor."⁶⁹

But not everyone had embraced such a balanced approach. Macdonald was also privy to the abundant outpourings of leading eugenicists across the United States (where 22 states had sterilization laws in place by the mid-1920s⁷⁰). These included Paul Popenoe, E.S. Gosney, and E.O. Butler of California, where, from the codification of eugenics law in April 1909 through October 1925, 3,598 insane and 941 feeble-minded inmates of state institutions had fallen under the sterilizer's scalpel.⁷¹ The BCRCMH assistant secretary also absorbed a continuing barrage of pro-sterilization and anti-immigration rhetoric from provincial authorities such as McKay and Steeves. Meanwhile journalists persisted with their lobbying in the local media. In April, for example, the editorialists for the *Vancouver Sun* queried, "Is it not more humane and infinitely more reasonable to condemn the unborn unfit to non-existence than to permit them to be born and then condemn them to punishment and death? If civilization is to be protected from the rebellion and destructive tendencies of the underman, sterilization of those unable to bear

the burden of civilization is essential."⁷² Not to be outdone, their *Vancouver Province* counterparts chimed in: "we can not expect to build a successful and virile nation here if we allow the springs of our nationhood to be polluted by the mental defectives of other lands."⁷³

Into this composite of divided opinion entered the report of psychologist Helen P. Davidson, Buckel Fellow in the Psychology Department at Stanford University, whom the BCRCMH engaged to document the genetic profiles of the province's insane inmates. A New Westminster native and former instructor in special classes for the feeble-minded,⁷⁴ Davidson reviewed the prevailing research and analyzed case files for the 3,883 persons admitted to the B.C. mental hospital system through the decade ending 30 June 1926.⁷⁵ Davidson proved to be a less than fervent proponent of the eugenic cant. "A cursory survey of the literature," she wrote, "shows remarkable disagreement among the authorities as to the amount of what is popularly termed insanity that is due to heredity."⁷⁶ Her study of the hospital records revealed that more than 70 per cent of B.C. insanity cases were traceable to factors other than heredity. Admittedly, Davidson did not dissociate herself entirely from hereditarian doctrine: her recommendations reprised the familiar clarion calls for immigration control, deportation, and sterilization.⁷⁷ But for the most part her recommendations concentrated on the imperatives of research, education, social service, prevention, treatment, and training.⁷⁸

When it came to sterilization, the need for a circumspect approach was becoming increasingly apparent. While the hard line on immigration had garnered virtually no opposition,⁷⁹ eugenic surgery was a different matter altogether. There seemed to be too many potent counter-arguments around the impracticality of legislation, the questionable science of hereditarianism, and the implied threats to civil liberties.⁸⁰ Indeed, from the very beginning, the Commission had been inclined "to recommend, for a start, a mild permissive rather than compulsory law."⁸¹ By November 1926, Macdonald confided that "I have begun to modify my own attitude" after finding "that apparently the majority of leading psychiatrists, if not exactly opposed [to sterilization], give it so inferior a place that they do not recommend its adoption in the face of the opposition it has already aroused." Despite these trepidations, Macdonald remained optimistic about the long-term prospects for eugenics legislation in B.C.: "If our Commission recommends a carefully modified law and it gets past the legislature, I do not anticipate much public opposition. Our people are like Cabell's⁸² here — willing to try any drink once, which is the way of the west, in Canada as well as the U.S."⁸³

Prescriptions for Reform

Into Macdonald's hands fell the task of synthesizing the vast array of facts and recommendations into the Commission's interim report.⁸⁴ After vetting the assistant secretary's draft, the Commissioners officially released the document on 4 March 1927. The report was a revealing study in compromise — a hybrid of populist and scientific, eugenic and mental hygiene reasoning. On the one hand, the BCRCMH wrote approvingly of the "revolution in methods of care and treatment" to which they had borne witness throughout their investigations to date, and of the "growth of public enlightenment on the subject in nearly all civilized communities" which "has forced radical changes in the attitude and sense of responsibility of society and the state towards the mentally afflicted."⁸⁵ Similarly, they argued that the quantitative growth of insanity in B.C. was not at all incommensurate with trends elsewhere, and that methods of treatment and care in the provincial hospitals "compare favourably with any on this continent."⁸⁶ On the other hand, the Commissioners warned that an acute overcrowding exigency, stemming in large part from the indiscriminate influx of foreign-born insane, was threatening to paralyze the province's asylum system.

The BCRCMH offered six main prescriptions for remedying this crisis: (1) a Provincial Board of Control to oversee the operations of B.C. mental hospitals, (2) a psychopathic hospital for Vancouver, (3) removal of mental deficients to suitable accommodation in a colony system or alternative care and housing, (4) voluntary sterilization of psychiatric inmates to eliminate "the danger of procreation with its attendant risk of multiplication of the evil by transmission of the disability to progeny,"⁸⁷ (5) consultation with other provinces around the payment of maintenance costs for inter-provincial migrant patients, and (6) representations to the Dominion government for better medical screening of unfit immigrants.

In the report's appendices, the Commissioners echoed Helen Davidson in equivocating on the heredity question. They referred to the "wide variance of opinion as to the proportion of insanity due, either partially or wholly, to this cause," and favourably quoted authorities such as Hincks, and A.T. Mathers of the Winnipeg Psychopathic Hospital, who attributed escalating mental inmate populations to improvements in institutional care, patient longevity, more liberal standards for admission, and "the increasing complexity of community life."⁸⁸ Moreover, their discussions around psychopathic hospitals and training of the feeble-minded were festooned with references to environmental influence and the need for social reform.

Yet on the vital topics of immigration and sterilization of the unfit, the BCRCMH members recited the customary eugenic liturgy. When it came to unfit foreigners, they predictably enjoined immigration authorities to enforce the existing prohibition of "idiots, imbeciles, feeble-minded persons, epileptics, insane persons, and persons that have been insane at any time previously."⁸⁹ The state, they declared, has a moral and legal obligation to debar those who would "add to the burden of the nation caused by mental abnormality."⁹⁰ Extolling the California program of reproduction control, the commissioners chose "to put greater reliance on the actual experience in that State than upon the theoretical objections of those who have not had the same opportunity of ascertaining by direct observation whether or not these objections are justified." They argued, too, that critics who cited civil liberties violations were simply missing the point. "Apart from any question," the BCRCMH claimed, "as to whether or not the rights of the individual may be held to be above the good of society at large, this argument has no application to the sterilization of a restricted class of the mentally abnormal..."⁹¹ While the report arrived too late for legislative action in the current session, Rothwell was confident about the prospects for pushing it through "without serious contention" in January 1928.

In April, Macdonald distributed 1500 copies of the interim report throughout B.C., the rest of Canada, and the United States.⁹² The document was generally well received. Clare Hincks, for one, proclaimed that "the Mental Hygiene Commission of British Columbia has performed a useful piece of work in studying mental hospital problems."⁹³ Media coverage was also approving. The *Vancouver Western Tribune* reserved special praise for the sterilization proposals.⁹⁴ The *Victoria Colonist* urged that "the Commission, whose report indicates that the problem has been given very careful study, should be allowed to continue its activities with the assistance of the best medical knowledge which is obtainable in the Province, and its main recommendations should be implemented without unnecessary loss of time."⁹⁵

Throughout 1927, the BCRCMH mobilized in preparation for its final submission to the House. In March, Macdonald secured an appropriation to support his Commission work for a second year.⁹⁶ By summer, the Oliver government had approved a \$2-million construction blueprint for the provincial hospitals, which included a 750-bed Women's Chronic Building and an additional wing for the Acute Building at Essondale, as well as a new apartment home for employees on the same grounds. But, to the Commissioners' chagrin, the long-awaited Vancouver psychopathic hospital, while obliquely mentioned, did not figure into the immediate plans.⁹⁷

Then, in June, to the collective shock of his colleagues, E.J. Rothwell died of a stomach hemorrhage while vacationing in the interior B.C. town of Quesnel.⁹⁸ The death of their chairman — and the only medical professional on the Commission — prolonged the BCRCMH's work by several months. It would be September before they elected V.W. Odlum as Rothwell's replacement. Finally, several weeks after J.A. Macdonald moved back to Victoria in January 1928, the commissioners convened to authorize their final report.

On 9 March 1928, the four surviving BCRCMH members released that document to the provincial Legislature. For the most part the report recapitulated the proposals of its 1927 antecedent. When compared with the typically extremist rhetoric of American sources reprinted in its appendices,⁹⁹ the main body of the text seemed positively subdued. The Commissioners concentrated principally on the subject of mental deficiency. They declared that scientific inquiry had had the salutary effect of dampening the "alarmist attitude" toward subnormality that had dominated public attitudes earlier in the century. The BCRCMH by no means retreated from its eugenicist partialities around sterilization and immigration, but the Commissioners' main allegiance was now plainly to the environmentally-inclined mental hygienist agenda. They optimistically maintained that "[t]he key-note of a constructive programme for mental deficient is training, and nine-tenths of deficient children can be trained with greatest advantage in the public-school system. The problem, therefore, is educational rather than medical."¹⁰⁰

Their drift away from the hard-line eugenicist agenda was also evident in the Commissioners' concluding recommendations. While they continued to advocate custodial confinement of "low-grade idiots and imbeciles" and public protection from the "dangerous anti-social" feeble-minded, now there was an accompanying emphasis on "vocational training of higher-grade mental deficient." Further, the BCRCMH endorsed special classes for subnormals in all B.C. population centres of 500 or more residents, provincial grants underwriting the vocational training of special class graduates, a provincial training school for deficient who were unsuited for special classes or lived in far-flung regions, public education regarding "the mentally handicapped," a separate *Mental Deficiency Act* along the lines of the 1913 English statute,¹⁰¹ acceptance of the CNCMH's offer of matching funds for ongoing research, and the appointment of a provincial psychiatrist to counsel the government on mental hygiene matters. Even on the sterilization question their discourse was observed to thaw, as they advised "a carefully restricted and safeguarded measure of permissive sexual sterilization of certain suitable and definitely ascertained cases of mental abnormality ... with the object that such cases may be permitted safely to return to their normal place in the community."¹⁰²

Aftermath

In tabling this final report, the BCRCMH ended its mandate. John MacLean, now premier, proclaimed that the document "will be of the utmost value in the consideration of the problem of insanity in this Province, and all of its recommendations will have the careful study of the Government."¹⁰³ But once again fate intervened. Before the Liberal government could act, the House dissolved and Tolmie's Conservatives swept to power in summer 1928. This changing of the B.C. political guard, along with the economic depression that descended in the following year, combined to retard implementation of the BCRCMH's mental hygiene agenda.

Indeed, the proposed psychopathic hospital for Vancouver never did materialize.¹⁰⁴ On other fronts, however, authorities slowly regrouped. Construction on the Female Chronic Building at Essondale carried forward, and the new facility opened in 1930. A year later the entire feeble-minded population relocated to the PHI (later renamed Woodlands School), under the superintendency of Louis Sauriol.¹⁰⁵ By autumn 1931, 23 special-class teachers for the subnormal were working in the Vancouver public school system.¹⁰⁶ Answering appeals dating back to the 1919 CNCMH survey, the government appointed A.L. Crease provincial psychiatrist in 1934.¹⁰⁷ By 1937, despite continuing economic stringency, the provincial mental hygiene operations expanded to encompass a Veterans' Building, a Home for the Aged, a Nurses' Home, and two re-modelled wards at the PHI. New services included a nurses' training school and post-graduate course,¹⁰⁸ an attendants' school, the hiring of three social workers,¹⁰⁹ and integration with provincial fieldwork services. The province also established a Child Guidance Clinic in Vancouver, and a travelling clinic for other areas, where "subnormal and feeble-minded children are dealt with, and parents and guardians receive advice."¹¹⁰

When it came to sterilization, the campaign continued as sexual surgery became increasingly identified with emerging eugenic ideas that attributed human problems "to poor parenting rather than to poor genes."¹¹¹ By the early 1930s it was incompetent mothers who became the main targets of sterilization crusaders.¹¹² As lobbyists intensified their efforts to suppress the reproductive functions of defective females, it became clear that this movement was primarily about controlling the sexuality of women and girls.¹¹³ B.C. sterilization crusaders were all the more energized by the 1928 passage of eugenic legislation in Alberta,¹¹⁴ by the avalanche of US statutes greeting the infamous 1927 Supreme Court judgment in *Buck v. Bell*,¹¹⁵ and by the advocacy of sterilization by the 1930 Ontario Royal Commission on Public Welfare¹¹⁶ and the Brock Committee in Britain four years thereafter.¹¹⁷

On 7 April 1933, the B.C. Legislature at long last enacted its own sterilization law,¹¹⁸ in which it adopted the BCRCMH recommendation for voluntary provisions.¹¹⁹ The legislation, a close replica of the Alberta code,¹²⁰ empowered a Eugenics Board to order the sexual sterilization of any mental hospital or industrial school inmate — on application of the institutional superintendent and consent of a marriage partner, parent, guardian or provincial secretary — who would otherwise be “likely to beget or bear children who by reason of inheritance would have a tendency to serious mental disease or mental deficiency.”¹²¹ The Board, comprising Justice H.B. Robertson, psychiatrist J.G. McKay, and Superintendent of Neglected Children Laura Holland, went into operation on 31 October 1933.¹²² The government engaged Dr. W.S. Turnbull of the Vancouver General Hospital to perform the operations at \$25 per patient.¹²³ However, British Columbia never embraced the legislation with the same ardency as did its Alberta and US neighbours. Between 1935 and 1945, 64 sterilizations of mental patients (of whom 57 were female) occurred,¹²⁴ and the Board attracted criticism for its generally phlegmatic performance.¹²⁵ Yet, while no more than 200-300 operations¹²⁶ ensued during the lifespan of the B.C. legislation — less than one-tenth of those occurring in Alberta — eugenic sterilization remained a potent weapon in the arsenal of provincial authorities until the law was finally rescinded in 1972.

In these ways, then, the inherent dualism of the mental hygiene movement — its mutually convergent yet ultimately irreconcilable allegiances to biology and social reform — continued to govern the course of psychiatric history in the province long after the BCRCMH submitted its final report to the Legislature. The medical establishment, and the various other helping and curing professions that emerged between the wars, never fully succeeded in resolving these contradictions or in forging a coherent program to enhance the mentality of the citizenry.

It is true that psychiatric and psychological practice was extending farther and farther out into the community, and that reformers like Hincks were increasingly insisting that “[i]t is a mistake to look upon the insane as essentially different from ourselves.”¹²⁷ Yet by the early 1930s British Columbia’s segregative mental institutions were also on the verge of an unprecedented surge of expansion that would not subside for more than two decades. Still further, a new era of somatic psychiatry was about to commence, as asylum keepers began to apply metrazol, insulin, mercury, electricity, and largactil to the bodies and brains of patients in their latest quest for a madness remedy.¹²⁸ As for the mentally deficient, after the “myth of the menace of the feeble-minded” began to evaporate during the 1930s, and once the cognitively

disabled were forever separated from the insane and secreted away in "training schools," they "began to move from the centre of the political stage and lapse into obscurity."¹²⁹

But ultimately the centre could not hold. Burdened with the legacy of their eugenicist past and unable to ignore the remorseless realities of mid-century institutional psychiatric practice, reformers elected *en masse* to abandon the mental hygiene concept altogether.¹³⁰ In 1950 even that national flagship of the movement, the CNCMH, reinvented itself as the Canadian Mental Health Association.¹³¹

In the end, the BCRCMH, and the interlocking reform enterprises that it both reflected and advanced, need to be appraised against the backdrop of these wider historical currents. Like most such ventures, the BCRCMH proved to be less an independent instrument of social change than a template on which the obsessions and forebodings, the preoccupations and longings of an entire generation were inscribed. In the mental hygiene movement, in British Columbia and beyond, legislators, professionals, and public all saw an uncommon opportunity to remake biology and history, and to fashion a political, scientific, and legal order that would accentuate human quality and realize the full potential of the citizenry. The enduring irony was that, in their crusades to transcend the nineteenth century, too often these citizen scientists and reformers succeeded only in reviving its most totalitarian tendencies. The tragedy was that the hygienists' route to utopia was impossibly congested with the countless thousands who, by virtue of their social status, bearing or mentality, failed to meet these capricious citizenship standards and were accordingly consigned to the nation's asylums, prisons, detention centres, training schools, and surgical slabs. In their grand experiment aimed at making ideal citizens, the mental hygienists showed just how fragile Canadian citizenship really was.

Notes

1. The research for this chapter benefitted enormously from a grant supplied by the Social Sciences and Humanities Research Council of Canada, in support of our collaborative project "Governing Bodies: Sexually Transmitted Diseases and the Politics of Citizenship in Canada, 1880-1945." My thanks go to Rob Adamoski, Dorothy Chunn, Joel Freedman and Jeffie Roberts; and to the professionals and staff of the BC Archives, National Archives of Canada, University of British Columbia Special Collections, University of Victoria Library, BC Legislative Library, Cumberland Museum (Lisa Baird and Barb Lemky), and Archives for the History of Canadian Psychiatry and Mental Health Services (John Court, Cynthia Cochrane, Cyril Greenland, and the late Jack Griffin).

2. "The Mental Hygiene Movement in Canada," *The Canadian Nurse* (1928): 59-62, 62. Although the editors fail to denote the author, it is almost certain that either C.M. Hincks or D.M. Le Bourdais of the Canadian National Committee for Mental Hygiene (CNMCMH) contributed these words.
3. Throughout this chapter, in the interests of preserving the historical discourse, I use the popular and medical vernacular of the day ("feeble-minded," "defective," "subnormal," "lunatic," "insane") without qualification or commentary.
4. My emphasis.
5. "House Supports Drastic Measures Against Insanity," 25 Nov. 1925. This clipping, from which the above quotations are extracted, appears in the CMHA Scrapbook, Vol. 1, 1925-1930, Archives for the History of Canadian Psychiatry and Mental Health Services (hereinafter CMHA Scrapbook). It is likely derived from the *Vancouver Star*, which went out of print in 1933 and for which microfilm copies are unavailable. For other accounts of Sloan's speech, see "Steps Taken By Legislature to Guard Province," *Victoria Colonist*, 25 Nov. 1925; and "Sloan Says B.C. Gets Backwash," *Vancouver Daily Province*, 25 Nov. 1925, 16.
6. "Stern Measures, Including Sterilization of Lunatics, Proposed to Cure Insanity," *Victoria Times*, 19 Nov. 1925. CMHA Scrapbook.
7. Lieutenant-Governor Order-in-Council, *Public Inquiries Act*, 30 Dec. 1925. British Columbia Archives and Records Service (hereinafter BCARS), GR 865, box 1, file 4.
8. "Notice Under Public Inquiries Act," *Vancouver Star*, 7 April 1926. BCARS, GR 865, box 1, file 1.
9. See, for example, J.M. Barbelet, *Citizenship* (Minneapolis: University of Minnesota Press, 1988); "Symposium on Citizenship, Democracy, and Education," ed. Larry Becker and Will Kymlicka, *Ethics* 105 (April 1995): 465-579; T.M. Marshall and Tom Bottomore, *Citizenship and Social Class* (London: Pluto, 1992); Will Kymlicka and Wayne Norman, "Return of the Citizen: A Survey of Recent Work on Citizenship Theory," *Ethics* 104 (January 1994): 352-81; Ruth Lister, *Citizenship: Feminist Perspectives* (New York: NYU Press, 1997); Maurice Roche, *Rethinking Citizenship: Welfare, Ideology and Change in Modern Society* (Cambridge: Polity Press, 1992); *The Citizenship Debates: A Reader*, ed. Gershon Shafir (Minneapolis: University of Minnesota Press, 1998); Jeff Spinner, *The Boundaries of Citizenship: Race, Ethnicity, and Nationality in the Liberal State* (Baltimore: Johns Hopkins Press, 1994); Nancy Leys Stepan, "Race, Gender, Science and Citizenship," *Gender and History* 10, 1 (April, 1998): 26-52; Bryan Turner, "Outline of a Theory of Citizenship," *Sociology* 24, 2 (May, 1990): 189-217; Sylvia Walby, "Is Citizenship Gendered?" *Sociology* 28, 2 (May, 1994): 379-95.
10. Ian Dowbiggin, *Keeping America Sane: Psychiatry and Eugenics in the United States and Canada, 1880-1940* (Ithaca, NY: Cornell University Press, 1997), 174.
11. Matthew J. Lindsay, "Reproducing a Fit Citizenry: Dependency, Eugenics, and the Law of Marriage in the United States, 1860-1920," *Law and Social Inquiry* 23, 3 (Summer 1998): 541-85, 571.
12. Canadian writings on eugenics history include Terry L. Chapman, "Early Eugenics Movement in Western Canada," *Alberta History* 25, 4 (1977): 9-17; Ian Dowbiggin, "Keeping This Young Country Sane": C.K. Clarke, Immigration Regulation, and Canadian Psychiatry, 1890-1925," *Canadian Historical Review* 76, 4 (December 1995): 598-627; Dowbiggin, *Keeping America Sane*; Ruth Marina McDonald, "A Policy of Privilege: The Alberta Sexual Sterilization Program 1928-1972" (MA Thesis, University of Victoria, 1996); Angus McLaren, "The Creation of a Haven for 'Human Thoroughbreds': The Sterilisation of the Feeble-minded and the Mentally Ill in British Columbia," *Canadian Historical Review* 67 (June 1986): 127-50; Angus McLaren, *Our Own Master Race: The Eugenic Crusade in Canada* (Toronto: McClelland and Stewart, 1990); Monica Wosilius, "Eugenics, Insanity and Feeble-mindedness: British Columbia's Sterilization Policy From 1933-43" (MA Thesis, University of Victoria, 1995). Some of the classic international works on eugenics are David Barker, "The Biology of Stupidity: Genetics, Eugenics and Mental Deficiency in the Inter-War Years," *British Journal for the History of Science* 22 (1989): 347-75; Mark H. Haller, *Eugenics: Hereditarian Attitudes in American Thought* (New Brunswick, NJ: Rutgers University Press, 1963); Marouf A. Hassian Jr., *The Rhetoric of Eugenics in Anglo-American Thought* (Athens: University of Georgia Press,

- 1996); Richard Hofstadter, *Social Darwinism in American Thought* (New York: George Braziller, 1969); Daniel J. Kevles, In *the Name of Eugenics: Genetics and the Uses of Human Heredity* (New York: Knopf, 1985); Kenneth M. Ludmerer, *Genetics and American Society: A Historical Appraisal* (Baltimore: Johns Hopkins University Press, 1972); Diane B. Paul, *Controlling Human Heredity* (Atlantic Highlands, NJ: Humanities Press, 1995); Steven Selden, *Inheriting Shame: The Story of Eugenics and Racism in America* (New York: Teachers College Press, 1999); Mathew Thomson, *The Problem of Mental Deficiency: Eugenics, Democracy, and Social Policy in Britain 1870-1959* (Oxford: Clarendon Press, 1998).
13. Peter H. Bruce, "Immigration in Relation to the Public Health," *Canadian Journal of Medicine and Surgery* 19, 4 (April, 1906): 203-10; C.K. Clarke, "The Defective and Insane Immigrant," *Bulletin of the Ontario Hospitals for the Insane* 2 (1908): 3-22; C.K. Clarke, "The Defective Immigrant," *Public Health Journal* 7 (1916): 462-65; C.K. Clarke, "Immigration," *Public Health Journal* 10 (1919): 441; A.H. Desloges, "Immigration and the Mentally Unfit," *Social Welfare* (1 March 1919): 138-39; J.D. Pagé, "Immigration and the Mentally Unfit," *Public Health Journal* 6 (1915): 554-58; J.D. Pagé, "Medical Aspects of Immigration," *The Canadian Nurse* 26, 8 (August, 1929): 395-9. Contemporary works on anti-immigration and the medical profession in Canada include Dowbiggin, "'Keeping This Young Country Sane'"; Zlata Godler, "Doctors and the New Immigrants," *Canadian Ethnic Studies* 9 (1977): 6-17; Robert Menzies, "Governing Mentalities: The Deportation of 'Insane' and 'Feeble-minded' Immigrants Out of British Columbia From Confederation to World War II," *Canadian Journal of Law and Society* 13, 2 (Fall 1998): 135-73; Barbara Roberts, "Doctors and Deports: The Role of the Medical Profession in Canadian Deportation, 1900-20," *Canadian Ethnic Studies* 18, 3 (1987): 17-36. See generally Barbara Roberts, *Whence They Came: Deportation From Canada 1900-1935* (Ottawa: University of Toronto Press, 1988).
 14. "Editorial," *Canadian Medical Association Journal* 2, 11 (November 1912): 1020-22.
 15. Helen Reid, "Introduction," in W.G. Smith, *A Study in Canadian Immigration* (Toronto: Ryerson Press, 1920), cited in Kathleen J.A. McConnachie, "Science and Ideology: The Mental Hygiene and Eugenics Movements in the Inter-War Years, 1919-1939" (PhD Dissertation, University of Toronto, 1987), 85.
 16. See J. David Smith, *Minds Made Feeble: The Myth and Legacy of the Kallikaks* (Rockville, MD: Aspen Systems Corporation, 1985); James W. Trent Jr., *Inventing the Feeble Mind: A History of Mental Retardation in the United States* (Berkeley: University of California Press, 1994).
 17. McLaren, *Our Own Master Race*, 91.
 18. Nicole Hahn Rafter, *Creating Born Criminals* (Urbana: University of Illinois Press, 1997), 238.
 19. William D. Tait, "Democracy and Mental Hygiene," *Canadian Journal of Mental Hygiene* 3 (1921): 31-36, 33.
 20. F.C.S. Schiller, "The Case For Eugenics," *Dalhousie Review* 4 (April 1924-January 1925): 405-10, 409, 410.
 21. See Harley D. Davidson, "Scientific Parenthood: The Mental Hygiene Movement and the Reform of Canadian Families, 1925-1950," *Journal of Comparative Family Studies* 24, 3 (Autumn, 1993): 387-402; John D. Griffin, *In Search of Sanity: A Chronicle of the Canadian Mental Health Association, 1918-1988* (London, ON: Third Eye Books, 1989); McConnachie, "Science and Ideology"; David McLennan, "Beyond the Asylum: Professionalization and the Mental Hygiene Movement in Canada 1914-1928," *Canadian Bulletin of Medical History* 4 (1987): 7-23; Charles G. Roland, *Clarence Hincks: Mental Health Crusader* (Toronto: Hannah Institute and Dundurn Press, 1990); Harvey G. Simmons, *From Asylum to Welfare* (Downsview, ON: National Institute on Mental Retardation, 1982).
 22. "The Mental Hygiene Movement in Canada," *The Canadian Nurse* (1928): 59-62, 59.
 23. Clifford Beers, *A Mind That Found Itself* (New Haven, CT: Yale University Press, 1925). Beers is quoting from Professor William H. Burnham. BCARS, GR 865, box 1, file 9.
 24. Dowbiggin, *Keeping America Sane*, 171.
 25. C.M. Hincks, "Recent Progress of the Mental Hygiene Movement in Canada," *Canadian Medical Association Journal* 11 (1921): 823-25, 825.

26. "Reach Social Utopia Before the Year 2026," *Toronto Mail and Empire*, 20 May 1926. The quotation is extracted from an address in May 1926 by University of Toronto psychology professor W.E. Blatz to the Toronto Children's Aid Society. CMHA Scrapbook.
27. See note 20 above.
28. McConnachie, McLaren and Dowbiggin have all made this observation in, respectively, "Science and Ideology," *Our Own Master Race*, and *Keeping America Sane*.
29. Simmons, *From Asylum to Welfare*, 110-11.
30. "Mental Hygiene Survey Province of British Columbia," *Canadian Journal of Mental Hygiene* 2, 1 (1920): 3-59, 11.
31. "Mental Hygiene Survey Province of British Columbia," 51.
32. Psychopathic hospitals began to appear around North America during the second decade of the twentieth century, focussing on the short-term treatment of acute cases and on integration with university, community, and research services. Probably the most renowned was Boston Psychopathic, built in 1912, and operating in the mid-1920s with 110 beds under chief executive officer C.A. Bonner. Winnipeg Psychopathic, directed by Alvin T. Mathers, was the first such Canadian facility. In Toronto, a similar operation began on 30 November 1925 under C.B. Farrar. C.A. Bonner to J.A. Macdonald, 10 Sept. 1926. BCARS, GR 865, box 2, file 4; Editorial, "Manitoba's Progress in Mental Hygiene," *Canadian Journal of Mental Hygiene* 3 (1921): 280-84; C.B. Farrar, Transcript, "Public Hearings of the British Columbia Royal Commission on Mental Hygiene," 13, 14 April 1926, Vancouver Minister's Room, Court House, Vancouver. BCARS, GR 865, box 1, file 7.
33. The Public Hospital for the Insane (PHI) in New Westminster opened in 1878 as a replacement for the ramshackle Victoria Lunatic Asylum on Vancouver Island. The PHI was joined on 1 April 1913 by the Provincial Mental Home, Essondale, which occupied 1000 acres of land on a hillside in Coquitlam, just east of Vancouver.
34. The aims of special classes (which originated in Germany in 1863 and arrived in the United States in 1894, Toronto in 1910, and Vancouver a year later) "were to remove feeble-minded children from the regular school system where they were thought to constitute a disruptive influence on the regular pupils; to provide feeble-minded children with special education suitable to their needs and in particular one that would make them self-supporting; to protect them from harassment by children in regular classes; and to determine which among them was incapable of education and training and should be sent to custodial institutions." Simmons, *From Asylum to Welfare*, 90. Supervisor Josephine Dauphinée reported that, by 1926, there were 19 special classes operating in Vancouver (with 289 students), two in Victoria, and one in New Westminster. Transcript, "Public Hearings of the British Columbia Royal Commission on Mental Hygiene," 13, 14 April 1926. See also A. Josephine Dauphinée, "Vancouver's Sub-Normal Population," *Canadian Journal of Mental Hygiene* 3 (1921): 117-24; C.M. Hincks, "Recent Progress of the Mental Hygiene Movement in Canada," *Canadian Medical Association Journal* 11 (1921): 823-25.
35. "Mental Hygiene Survey Province of British Columbia," 51-55.
36. "Mental Hygiene Survey Province of British Columbia," 58.
37. *The Problem of the Feeble-Minded: An Abstract of the Report of the Royal Commission on the Care and Control of the Feeble-Minded* (London: P.S. King and Son, 1909). See Simmons, *From Asylum to Welfare*, 55-63.
38. "Investigation of Royal Commission Into the Existing Methods of Dealing With Mental Defectives in Ontario," *Canadian Journal of Mental Hygiene* 1 (1919-20): 88-92. See also McConnachie, "Science and Ideology," 59-62; Simmons, *From Asylum to Welfare*, 85-102.
39. Commission chair Justice Frank Egerton Hodgins took pains to quote the ubiquitous Walter E. Fernald, Superintendent of the Massachusetts School for the Feeble-Minded, to the effect that the feeble-minded constituted "a parasitic, predatory class, never capable of self-support or managing their own affairs." The women in particular were "almost invariably immoral, and, if at large, usually become carriers of venereal disease or give birth to children who are as defective as themselves." Simmons, *From Asylum to Welfare*, 93.
40. "Magistrate Murphy Reports on First Investigation of Asylums and Jails by Public Committee," *Medicine Hat News*, 28 May 1926. CMHA Scrapbook.

41. "Consults With Authorities on Mental Hygiene," *Halifax Herald*, 27 Jan. 1927; "Gives Lecture to Gyro Club," *Halifax Herald*, 26 May 1927; "Select N.S. Doctor for New Office," *Halifax Evening Mail*, 22 Sept. 1927. CMHA Scrapbook. See also Simmons, *From Asylum to Welfare*, 118.
42. C.E. Doherty, "The Care of the Mentally Disordered," unpublished paper. BCARS, GR 865, box 1, file 11.
43. "Discuss Problem of Mental Defectives," *Victoria Times*, 24 Nov. 1925. CMHA Scrapbook.
44. At the federal level, the National Council of Women (NCW) was the main clearinghouse for maternal feminist organizing. On feeble-mindedness and citizenship, for instance, the NCW convenor for mental hygiene, Dr. Elizabeth Smith Shortt, wrote in 1926 that "[t]he burden on the superior stock — the so-called normal — is tremendous ... segregation or operation or both, are means whereby we can save civilization." National Council of Women, *1926 Report*, 218. See generally Carol Bacchi, "Race Regeneration and Social Purity: A Study of the Social Attitudes of Canada's English-Speaking Suffragists," *Histoire sociale/Social History* 11 (1978): 260-74; Dowbiggin, *Keeping America Sane*; McLaren, *Our Own Master Race*; McConnachie, "Science and Ideology."
45. J.A. Macdonald to W.C. Laidlaw, Deputy Minister of Public Health, Alberta, 30 July 1926. BCARS, GR 865, box 1, file 2.
46. W.A. Mackenzie, "The Condition of Overcrowding in the Mental Hospitals of British Columbia," Report to the BCRCMH, nd, 1, 3, 4. BCARS, GR 865, box 2, file 10.
47. Members also resolved that the provinces should have the authority to re-examine all immigrants and, failing that, the Dominion should bear the expenses for any immigrant who becomes a public charge. Resolution of the B.C. Legislature, 25 Nov. 1925. BCARS, GR865, box 1, file 12.
48. "Sterilizing Defectives Urged as Aid to Nation." *Vancouver Star*, 2 Dec. 1925.
49. BCARS, GR 865, box 1, file 6.
50. "E.J. Rothwell, M.D., M.L.A.," *Bulletin of the Canadian National Committee for Mental Hygiene* 2, 7 (July 1927): 2.
51. The Encyclopedia of British Columbia, ed. dir. Dan Francis (Madeira Park, BC: Harbour, 2000), 510; see also Scott Kerwin, "The Janet Smith Bill of 1924 and the Language of Race and Nation in British Columbia," *BC Studies* 121 (Spring, 1999): 83-114, 87-90.
52. Personal communication, Lisa Baird and Barb Lemky, Cumberland Museum. 5 July 2001.
53. William Sloan to H.C. Steeves, 13 Oct. 1925. BCARS, GR542, box 14, file 5.
54. Robin Fisher, *Duff Pattullo of British Columbia* (Toronto: University of Toronto Press, 1991), 218; Ian Donald Parker, "Simon Fraser Tolmie and the British Columbia Conservative Party 1916-1933" (MA Thesis, Simon Fraser University, 1970), 73.
55. "Mental Hospital has 700 in Rooms for 500," *Vancouver Province*, 11 Jan. 1926. CMHA Scrapbook.
56. Minutes, meeting of the BCRCMH, 13 Jan. 1926; V.W. Odlum to William Sloan, 13 Jan. 1926. BCARS, GR 865, box 1, file 6. See also "Lunacy Commission Outlines Programme," *Victoria Colonist*, 16 Jan. 1926; "Lunacy Inquiry Programme Made," *Victoria Times*, 15 Jan. 1926. CMHA Scrapbook.
57. Memorandum. "Expenses Re: Royal Commission." BCARS, GR 646, box 1.
58. J.A. Macdonald to C.M. Hincks, 2 May 1927. BCARS, GR 865, box 1, file 3; J.A. Macdonald to J.S. Woodsworth, 17 June 1926. BCARS, GR 865, box 1, file 2.
59. "Distressing Conditions Found by Commission in B.C.'s Asylums," *Victoria Daily Colonist*, 11 Feb. 1926, 3. Hayward discovered, to his pleasure, that the women "mostly seemed to agree on the matter of sterilization of mental defectives, and some said that stricter marriage laws should be enacted." Reginald Hayward to V.W. Odlum, 11 Feb. 1926. BCARS, GR 865, box 1, file 1. See also BCARS, GR 645, vol. 4.
60. J.A. Macdonald to V.W. Odlum, 4 May 1926. BCARS, GR 865, box 1, file 1.
61. From the outset it was apparent that the Commission's openness to full public debate was, to say the least, debatable. As Rothwell wrote in January of that year, "I don't think we are duty bound to hear every Tom, Dick & Harry." E.J. Rothwell to V.W. Odlum, 25 Jan. 1926. BCARS, GR 865, box 1, file 1.

62. Transcript, "Public Hearings of the British Columbia Royal Commission on Mental Hygiene," 13, 14 April 1926. See also "Low Mentality Great Cause of Delinquency," *Vancouver Sun*, 15 April 1926; "Mental Commission Adjourns Hearing," *Vancouver Province*, 14 April 1926; "Mental Commission to Sit Here Next," *Victoria Colonist*, 15 April 1926. CMHA Scrapbook. For a brief account of the hearings see also McLaren, *Our Own Master Race*, 96-97.
63. For more on Henry Shaw, see Alison J. Hatch and Curt T. Griffiths, "Child Saving Postponed: The Impact of the Juvenile Delinquents Act on the Processing of Young Offenders in Vancouver," in *Dimensions of Childhood: Essays on the History of Children and Youth in Canada*, ed. Russell Smandych, Gordon Dodds, and Alvin Esau (Winnipeg: Legal Research Institute, 1991), 233-66.
64. Transcript, "Public Hearings of the British Columbia Royal Commission on Mental Hygiene," 13, 14 April 1926.
65. The newly-established national Department of Health inaugurated the Dominion Council of Health in 1919 as a forum for provincial-federal consultation on health issues. J.J. Heagerty, "History and Activities of the National Health Division of the Department of Pensions and National Health," *Canadian Journal of Public Health* 26 (1935): 528-40, 540.
66. Transcript, "Public Hearings of the British Columbia Royal Commission on Mental Hygiene," 16 April 1926. Members' Room, Parliament Buildings, Victoria. BCARS, GR 865, box 1, file 7.
67. See P.P. Harrison. "Immigration and its Effects on the Increase of Insanity," Report to the BCRCMH, 8 Jan. 1927, 6, 7. BCARS, GR 865, box 1, file 12; Reginald Hayward, "Report on the 'Hereditary' Phase of the Cause of Insanity," Report to the BCRCMH, 15 April 1926. BCARS, GR 864, box 1, file 8.
68. From the outset, Hincks and the CNCMH had been highly interested observers of events unfolding on the west coast. See "Royal Commission on Mental Hygiene. British Columbia," *Bulletin of the Canadian National Committee for Mental Hygiene* 1, 7 (Dec., 1925): 3-4; "Mental Hygiene in British Columbia," *Bulletin of Canadian National Committee for Mental Hygiene* 2, 3 (April, 1926): 4-5; "Dr. Hincks Reports Optimistically on Mental Hygiene Progress in Four Western Provinces," *Bulletin of the Canadian National Committee for Mental Hygiene* 2, 7 (July, 1927): 1, 3.
69. C.M. Hincks to J.A. Macdonald, 16 July 1926. BCARS, GR 865, box 1, file 2.
70. See Harry Hamilton Laughlin, *Eugenical Sterilization in the United States* (Chicago: Psychopathic Laboratory of the Municipal Court of Chicago, 1922). Contemporary studies of sterilization history in the United States include Edward J. Larson, *Sex, Race, and Science: Eugenics in the Deep South* (Baltimore: Johns Hopkins University Press, 1995); Paul, *Controlling Human Heredity*; Philip R. Reilly, *The Surgical Solution: A History of Involuntary Sterilization in the United States* (Baltimore: Johns Hopkins University Press, 1991); *Sexual Sterilization*, ed. Jonas Robitscher (Springfield, IL: Charles C. Thomas, 1973).
71. See, for example, F.O. Butler, "Sterilization Procedure and its Success in California Institutions," State Department of Institutions, California, 12 Nov. 1925. In a typical passage from this report, Butler, Medical Superintendent of the Sonoma State Home for the Feeble-Minded, Eldridge, California, shares his views on the vital relationship between sterilization and the promotion of virile nationhood: "The very life of our Nation is its manhood and womanhood, and something must be done that we may beget none but sound offspring, and thus have a Nation physically and mentally strong." BCARS, GR 865, box 2, file 3, 9.
72. Editorial, "The Problem of the Unfit," *Vancouver Sun*, 16 April 1926. CMHA Scrapbook.
73. Editorial, "The Mentally Deficient," *Vancouver Province*, 2 Feb. 1927, 6.
74. "(Interim) Report of the Royal Commission on Mental Hygiene." BC Sessional Papers 1926-27, 3rd Session 16th Parliament, CC7.
75. V.W. Odlum to J.A. Macdonald, 16 Nov. 1926. BCARS, GR 865, box 1, file 2.
76. Helen P. Davidson, "A Report of the Heredity and Place of Origin of the Patients Admitted to the Provincial Mental Hospitals of British Columbia" (30 Nov. 1926), 4. The report is reproduced as Appendix G in the "(Interim) Report of the Royal Commission on Mental Hygiene," 33-54. A copy is also available in BCARS, GR 865, box 2, file 6.

77. Davidson, "A Report of the Heredity and Place of Origin," 49.
78. Specifically, Davidson recommended a "separate and appropriate institution for the care of the feeble-minded," special classes for the training of high grade morons (as she intimated, such special training would "enable the individual to be fitted into some small niche in the industrial world where he can be self-supporting and be a contented citizen. It is from such that the world obtains most of its 'hewers of wood and drawers of water'"); a psychopathic hospital; education of the public around insanity and mental deficiency; mental hygiene classes in the schools; social service workers for the mental hospitals; provincial research work on mental hygiene; and care of old folks suffering from senile dementia. Davidson, "A Report of the Heredity and Place of Origin," 49.
79. "Canada is now much more looked upon as the 'dumping ground' of Europeans whose people want to get rid of them. ... From everything I have been able to learn, you would be perfectly justified in reaching the conclusion that Canada has admitted an even greater proportion of unfit aliens than the U.S. and that the danger to be avoided in the immediate future is very great indeed." J.A. Macdonald to P.P. Harrison, 28 Sept. 1926. BCARS, GR865, box 1, file 2.
80. For a summary of the main arguments against sterilization, compiled by Macdonald as part of his research for the BCRCMH, see BCARS, GR 865, box 2, file 3.
81. J.A. Macdonald to C.M. Hincks, 28 June 1926. BCARS, GR 865, box 1, file 2.
82. This is a reference to characters in the novels of U.S. author James Branch Cabell, who garnered much controversy, not to mention accusations of obscenity, during the 1920s. See, in particular, Cabell's *Jurgen: A Comedy of Justice* (New York: R.M. McBride, 1919); *The High Place: A Comedy of Disenchantment* (London: John Lane, 1923); *The Silver Stallion: A Comedy of Redemption* (New York: R.M. McBride, 1926); and *Something About Eve: A Comedy of Fig-Leaves* (New York: R.M. McBride, 1927).
83. J.A. Macdonald to Paul Popenoe, 27 Nov. 1926. BCARS, GR 865, box 1, file 2.
84. J.A. Macdonald to VW. Odium, 22 Dec. 1926. BCARS, GR 865, box 1, file 2.
85. "(Interim) Report of the Royal Commission on Mental Hygiene," CC7.
86. "(Interim) Report of the Royal Commission on Mental Hygiene," CC6.
87. The members lifted these recommended criteria virtually unedited from the Alberta legislation. J.A. Macdonald to Malcolm R. Bow, Deputy Minister of Health, Alberta, 20 May 1927. BCARS, GR 865, box 1, file 3. Regarding the consent provision, as Rothwell advised Harry H. Laughlin of the Eugenics Record Office on Long Island, "[t]he Commission felt that it was best at this stage to recommend only a very restricted law, and that future action should be guided by actual results." They would obviously have preferred to go further. E.J. Rothwell to Harry H. Laughlin, 25 March 1927. BCARS, GR 865, box 1, file 3.
88. "(Interim) Report of the Royal Commission on Mental Hygiene," CC9-10.
89. *Immigration Act*, s 3(a).
90. "(Interim) Report of the Royal Commission on Mental Hygiene," CC30.
91. "(Interim) Report of the Royal Commission on Mental Hygiene," CC25-26.
92. BCRCMH Memorandum, 27 April 1927. BCARS, GR 865, box 2, file 10.
93. C.M. Hincks, "Dr. Hincks Reports Optimistically on Mental Hygiene Progress in Four Western Provinces," *Bulletin of the Canadian National Committee for Mental Hygiene* 2, 7 (July 1927): 1.
94. "Editorial," *Vancouver Western Tribune*, 19 March 1927. BCARS, GR 865, box 2, file 14.
95. "Commission on Insanity Urges Control Board," *Victoria Colonist*, 5 March 1927. CMHA Scrapbook.
96. J.A. Macdonald to J.L. White, Deputy Provincial Secretary, 8 April 1927. BCARS, GR 865, box 1, file 3.
97. "New Hospital For Essondale," *Vancouver Daily Province*, 28 July 1927, 3; "B.C. to Foot Big Bill For Insanity," *Victoria Daily Times*, 29 July 1927, 1.
98. J.A. Macdonald to C.M. Hincks, 30 June 1927. See also "Was a Noble Man, a Beloved Physician, and Worthy Citizen," *Bulletin of the Canadian National Committee for Mental Hygiene* 2, 7 (July 1927), 1.

99. For example, Appendix B comprised a report from the US National Committee for Mental Hygiene (NCMH), entitled "Mental Deficiency: A General Summary of the Problem," which claimed that "[f]eeble-minded persons are especially prolific and reproduce their kind with greater frequency than do normal persons, that through such reproduction provide an endless stream of defective progeny which are a serious drain on the resources of the nation." Alleging that "feeble-mindedness is one of the largest single factors in hereditary pauperism, juvenile vice and delinquency, adult crime and vagrancy, the spread of venereal disease, and the like," the NCMH deduced that "there is one sensible and really efficient measure that can be carried out, and that is to dam the stream near its source." "Final Report of the Royal Commission on Mental Hygiene," BC Sessional Papers, 1928, 4th Session, 16th Parliament, G10.
100. "Final Report of the Royal Commission on Mental Hygiene," BC Sessional Papers, 1928, 4th Session, 16th Parliament, G4.
101. For a review of the 1913 British legislation see, *inter alia*, Simmons, *From Asylum to Welfare*, 61-64.
102. "Final Report of the Royal Commission on Mental Hygiene," G5.
103. "Will Name Expert in Insanity," *Victoria Times*, 19 March 1928. BCARS, GR 865, box 2, file 14.
104. P.D. Walker. "Memo to Premier," 30 Aug. 1932. BCARS, GR 497, box 9, file 6. It was not until 16 November 1949 that the Crease Clinic of Psychological Medicine opened on the provincial mental hospital grounds at Essondale. A.L. Crease, "Director's Report," *Mental Hospitals Report, 1949-50*, BC Sessional Papers, 2nd Session, 22nd Parliament, 1950, V19.
105. See Val Adolph, *In the Context of its Time: A History of Woodlands* (Richmond: BC Ministry of Social Services, 1996).
106. A. Josephine Dauphinée to S.L. Howe, Provincial Secretary, 31 Oct. 1931. BCARS, GR 542, box 16, file 6.
107. In 1946 his title changed again, this time to Director of Mental Hygiene and Psychiatry. A.M. Gee, "Dr. Arthur L. Crease," *Mental Hospitals Report, 1949-50*, BC Sessional Papers, 2nd Session, 22nd Parliament, 1950, V13-4.
108. For a personal account of life at the Essondale nurses' school, see Agnes MacKinnon, *I Carried a Key: Three Years in a Mental Hospital: A Nurse's Story* (Vancouver: Hignell, 1996).
109. The head social worker, Josephine Kilburn, arrived in 1933, having been secured through the auspices of the CNCMH.
110. E.J. Ryan to C.M. Hincks, 27 Aug. 1937. BCARS, GR 542, box 22, file 5.
111. McLaren, *Our Own Master Race*, 111.
112. Allison C. Carey, "Gender and Compulsory Sterilization Programs in America: 1907-1950," *Journal of Historical Sociology* 11, 1 (March 1998): 74-105, 74; Molly Ladd-Taylor, "Saving Babies and Sterilizing Mothers: Eugenics and Welfare Politics in the Interwar United States," *Social Politics* (Spring 1997): 136-53; Deborah C. Park and John P. Radford, "From the Case Files: Reconstructing a History of Involuntary Sterilisation," *Disability and Society* 13, 3 (1998): 317-42; Jennifer K. Roberts, "'If Thine Eye Offend Thee, Pluck it Out': Sterilization and the Policing of Female Sexuality in Twentieth Century Western Canada" (MA Thesis, University of Victoria, 1999); Wosilius, "Eugenics, Insanity and Feeble-mindedness."
113. As McConnachie observes, "The nativist fears that prompted the western provinces to initiate mental hygiene surveys in 1918 and 1919 also carried over into a pro-sterilization campaign. If immigration to Western Canada had slowed by the late 1920s fears about the 'foreigners in our midst' persisted. In the West, the strong support of women's organizations remained the bedrock of the pro-sterilization campaign." McConnachie, "Science and Ideology," 234. See Bacchi, "Race Regeneration and Social Purity"; Chapman, "Early Eugenics Movement in Western Canada"; Dowbiggin, *Keeping America Sane*, 178; McLaren, *Our Own Master Race*.
114. Timothy J. Christian, "The Mentally Ill and Human Rights in Alberta: A Study of the Alberta Sterilization Act," Unpublished paper, University of Alberta, nd; McDonald, "A Policy of Privilege"; Park and Radford, "From the Case Files"; Roberts, "'If Thine Eye Offend Thee, Pluck it Out.'"

115. In *Buck v. Bell*, 274 U.S. 200 (1927), the US Supreme Court under 86-year-old Justice Oliver Wendell Holmes upheld Virginia's compulsory sterilization legislation by an 8 to 1 margin, unleashing a new wave of legislation and surgery. See especially Reilly, *The Surgical Solution*, 67-68, 86-87. By the 1960s, US physicians had sexually sterilized 60,000 people in that country, two-thirds of whom were women. See Carey, "Gender and Compulsory Sterilization Programs in America," 74.
116. On F.P.D. Ross' Ontario Commission, see McLaren, *Our Own Master Race*, 112, 186; Simmons, *From Asylum to Welfare*, 113-19.
117. Desmond King, "Experts at Work: State Autonomy, Social Learning and Eugenic Sterilization in 1930s Britain," *British Journal of Political Science* 29 (1999): 77-107. In contrast to F.P.D. Ross in Ontario, Sir Lawrence Brock backed away from recommending compulsory sterilization law.
118. *An Act Respecting Sexual Sterilization*, 1933, c.59, 23 Geo. 5, 199-201. Assented to 7 April 1933.
119. In a letter distributed to several key exponents of stronger legislation, Deputy Provincial Secretary P.D. Walker disclosed that, while no one wanted a consent clause, "it was felt that the Act must be in a sense tentative, and that all we could expect was to establish the principle in some degree." P.D. Walker to C.M. Hincks, 10 April 1933. BCARS, GR 497, box 10, file 8.
120. P.D. Walker to A.L. Crease, 6 April 1933. BCARS, GR 542, box 17, file 1.
121. *An Act Respecting Sexual Sterilization*, s4.1.
122. P.D. Walker to A.L. Crease, 1 Nov. 1933. BCARS, GR 542, box 17, file 2. G.A. Minorgan, an Essondale physician, took over from McKay in April 1935, and Justice A.M. Manson replaced Robertson on 6 March 1936. A.L. Crease to P.D. Walker, 3 April 1935. BCARS, GR 542, box 17, file 5; Isobel Harvey to E.W. Griffith (Associate Deputy Provincial Secretary), 18 March 1944. BCARS, GR 542, box 11, file 4.
123. W.S. Turnbull to A.L. Crease, 7 Jan. 1935. BCARS, GR 542, box 11, file 4.
124. Margaret Stewart, "Some Aspects of Eugenic Sterilization in British Columbia with Special Reference to Patients Sterilized From Essondale Provincial Hospital Since 1935," 17 Aug. 1945. BCARS, GR 496, box 38, file 3.
125. Isobel Harvey to E.W. Griffith (Associate Deputy Provincial Secretary), 18 March 1944. BCARS, GR 542, box 11, file 4; see also J.D.M. Griffin, "Mental Hygiene in Canada," *Canadian Public Health Journal* 31, 4 (April 1940): 163-74, 170.
126. Since the Board of Eugenics records long ago disappeared, it is impossible to obtain a precise figure. This estimate is based on projections from the annual number of sterilizations occurring in the decade up to 1945, along with sporadic reports available in the BC Archives mental health services collections. BCARS, GR 133, box 6.
127. "Says Mental Ills Exact Heavy Toll," *Montreal Gazette*, 18 May 1928. CMHA Scrapbook.
128. Joel Braslow, *Mental Ills and Bodily Cures: Psychiatric Treatment in the First Half of the Twentieth Century* (Berkeley: University of California Press, 1997); Peter Schrag, *Mind Control* (New York: Pantheon, 1978); Elliot S. Valenstein, *Great and Desperate Cures: The Rise and Decline of Psychosurgery and Other Radical Treatments for Mental Illness* (New York: Basic, 1996).
129. Simmons, *From Asylum to Welfare*, 108.
130. As A.L. Crease confided to Deputy Provincial Secretary P.D. Walker on 30 Jan. 1939, "Mental Hygiene has been over-sold, and advertising only produces unfavourable comment and undue publicity and, in the end, does more harm to the cause than it does good. It starts correspondence by all the fanatics, bigots and paranoids." BCARS, GR 542, box 18, file 4.
131. Griffin, *In Search of Sanity*, 154-65.