

# The Quiet Tragedy of Orillia

**By Thelma Wheatley**

*My article explores the role and responsibility of the parents of mentally retarded children placed in the institution (originally the Asylum for Idiots and Feeble-Minded) in Orillia, Ontario, over the past century. The class action lawsuit against the government of Ontario on behalf of former residents of the Huronia Regional Centre before the Superior Court of Ontario, in 2013, resulted in a \$35-million settlement and a formal apology from Premier Kathleen Wynne. However, parents were a vital component of institutionalization, an issue often overlooked. My article seeks to understand the relationship between parents' consent to institutionalize and their apparent subsequent neglect of the children incarcerated.*

Simmering beneath the historic Huronia class action lawsuit of 2013 against the government of Ontario was a compelling story of the parents' role, ignored by lawyers and media alike.

On September 17<sup>th</sup>, 2013, a \$35-million settlement was reached for approximately 3,700 survivors of Huronia. On December 9<sup>th</sup>, Premier Kathleen Wynne issued a heartfelt formal apology in the Ontario Legislature, admitting full culpability. After delays, the disbursement of funds began in 2015.

Huronia Regional Centre, commonly known as "Orillia" after the Ontario town, was the oldest provincial institution for the "mentally retarded" in Canada. Originally the Asylum for Idiots and Feeble-Minded, founded in 1876, the institution reached its zenith as Ontario Hospital

School by the early 1950s, with a population of nearly 2900, changing its name to Huronia Regional Centre in 1974.

The government of Ontario, which had operated the facility, was charged with failure to provide proper care for residents. Abuses included physical, psychological, spiritual and sexual abuse, the use of nausea-inducing drugs, and forced labour, amounting to a "breach of fiduciary trust." No one questioned the role of the parents throughout these institutional horrors. Originally, under Family Law, parents after 1972 were even included in the compensation settlement. The reasoning went that the parents had placed their trust in the government, only to be betrayed.

The issue of "fiduciary trust" is a sensitive one. Many surviving parents I interviewed, now in their seventies and eighties or older, are aware that they themselves had not always protected their children, had in fact often knowingly placed them in harm's way in Orillia. This was especially so after 1960, when reporter Pierre Berton wrote an exposé of the institution published in the January 6<sup>th</sup>, 1960, *Toronto Star*. His column, "What's Wrong With Orillia: Out of Sight Out of Mind," painted a picture of dire neglect, overcrowding, and abuse.

Berton clearly faulted parents as much as the administration. "It's easy to blame the government," he averred. "Do not say you did not know what it was like behind those plaster walls or underneath those peeling wooden ceilings."



One would have expected a dramatic exodus of residents following Berton's article. Yet the register of demissions for that year shows no such urgent rush by parents to remove their children. The implications of the annual statistics of Ontario Hospital School are all too evident.

In 1950, for instance, the population of the institution had been 2,400, and the number of patients discharged had been but 46. In 1960, the year of Berton's article, there were 2,810 patients in residence, but only 109 discharged (52 had died). The population actually increased, bringing the total to its greatest of all time — 2,916, a telling number that demonstrates just how many patients had long been disconnected from family who had given them over as “wards of the Crown,” often never to appear in their children's lives again.

These are sensitive painful realities for such parents, underlying the phenomenon of institutionalization, often difficult to address so many years later. Some surviving parents have stated to the author that they are uncomfortable discussing the past; they feel it best to “let sleeping dogs lie.” Why bring up unpleasant subjects? But by looking at

the parents' role and responsibility in placing a child in Orillia, or any institution, society can understand and learn from the mistakes of the past; it is the purpose of this article to delve more deeply into these issues.

Parents voluntarily continued to place children in Orillia, or “put them away,” as the phrase went, up to the 1980s, grateful for the option of institutionalizing when they could no longer cope.

Visiting times were set for each day and on weekends. Visitors were required to give advance notice. It is true, as parents claim, that they were not allowed in the dormitories or wards of a cottage. They met their child in a designated visitors' room. The reason cited was protection of residents' privacy, but more likely administration did not want the parents to see prevailing bad conditions upstairs.

Yet there were ways some parents overcame this. One group of mothers in Mississauga

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formed a volunteer group in the 1970s, and drove up to the institution once a week to help out in Cottage O. Abuses they saw taking place were

seldom reported for fear their visiting privileges would be stopped.

Some patients were thus lucky enough to be visited regularly by their parents or guardians, and taken home for visits. Others had to rely on the odd kind attendant or nurse who would take them to their own homes in town for overnight and weekend stays. The endless unmarked graves in the Huronia graveyard attest to how many residents had indeed lived and died in Orillia without going home, not even in death, their family names omitted on the grave stones, perhaps for fear of stigma for the families involved.

Here we come to the core of suffering for many of the children put away: the sense of emotional abandonment by their parents. When de-institutionalization finally took place in the 1980s, many parents no longer knew their “children” who had become aging adults and strangers inside Orillia over the decades – and their children no longer knew them.

Visiting was vitally important for parents in order to check on abuse. For example, Barry T’s grandparents, who were his guardians, visited Barry regularly. Like good guardians, once they had him alone they undressed him and checked his body, finding whip marks and obvious signs of abuse. (Barry in fact had been sodomized.) They took the matter to the superintendent, and even began legal proceedings, but got nowhere. These people were not well off or well educated, yet they had attempted to do the right thing by Barry. They had asked questions of their child, had confronted the administration.

Barry’s grandparents are the exception rather than the rule, but there are reasons for this. Parents were caught up in an implicit belief system that encouraged them to put their children away in Orillia in the first place, and leave them there for life; “custodial,” as it was called.

Parents played an important role in “institutionalization.” Since putting one’s child away was always voluntary in Canada (unlike the United States, where in many states

it was compulsory), parents held a certain implicit power. One could even say that *institutionalization could not have taken place without the cooperation and acquiescence of the parents*. Their consent was necessary to the process, a symbiotic relationship with government authorities and medical professionals. So how was that consent obtained? How did medical authorities—doctors after all were the front line in advising parents “what to do” if they had a retarded child—manage to

convince thousands of parents over an entire century to put their mentally defective child in an institution?

Basically, medical professionals had to convince parents to accept three basic concepts: that institutionalization was “*for the good of the child*” – a phrase constantly reiterated throughout the century – with the state assuming all rights of wardship; secondly, that parents were not the best people to train and educate their defective child; and thirdly, that trained staff in a special-

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ized institution could provide far superior care to home care. It was the parents' *duty* to acquiesce. These ideas were to remain in force throughout the century, up to the closure of Orillia in 2009.

### The Tyranny of the "IQ" Test

The most powerful tool acquired by the medical profession in the early 1900s was the "IQ Test." Originally developed by psychologists Alfred Binet and Theodore Simon in 1904, these Intelligence Scales became the lynch pin of institutionalization, the hinge on which it revolved. The powerful "Stanford-Binet" IQ test, never challenged by parents, intimidated rich and poor alike. A new, com-

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plex array of diagnostic terms – *imbecile, idiot, moron* – empowered those who employed them, the psychometrists, psychologists, and psychiatrists.

The IQ test gave rise to a more subtle form of intimidation: stigma and shame. Mora Skelton, Head of Social Work at the Toronto Mentally Retarded Clinic, recalled how in the 1960s parents still harboured a sense of stigma at having a retarded child. *"The days when some parents felt so ashamed and guilty about having a handicapped child that they hid such children away in the attic or basement were not quite over, and we saw one or two such terrible cases."*

### The Parents Rebel

The first half of the twentieth century had seen parents primarily passive, accepting doctors' pronouncements of the institution as the ideal place for mentally retarded children. Being primarily poor and uneducated had placed them at a disadvantage.

This was to change in the 1950s, when a virtual parents' rebellion took place.

A grandmother's letter to the editor of the *Toronto Daily Star* in 1949 became a rallying point. Victoria Glover brought to the fore a new type of parent:

"I think it was time something was done for parents who from a sense of faith and hope in merciful providence want to keep them at home living a normal life. These are real par-

ents only asking a little aid and encouragement to shoulder their own heavy burden."

Glover's plea had raised a powerful issue: "Why do I have to put my retarded child away in an institution in order for him to get an education and training?"

Parents banded together to form an association in 1954, called the

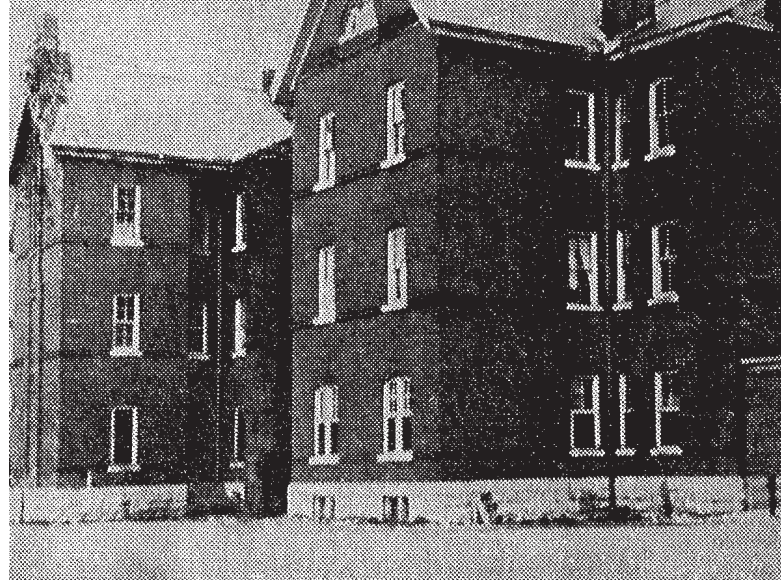
Ontario Association for the Mentally Retarded (OAMR). It was outright rebellion.

The OAMR soon became a powerful organization which raised huge amounts of money to fund projects to support developmentally challenged children. One of the first committees to be struck was the “Institutions Committee.” Its mandate was not to close Orillia but rather to recommend improvements to the facility. However, a small group calling themselves “Community” parents began to lobby for the closure of Orillia – and all institutions – assuming that was what all parents wanted. But here was the Achilles’ heel. *Not all parents wanted to do away with institutions*. Most wanted to keep Orillia in operation as an “option” for those who might need to put their child there as a last resort. These parents called themselves “Institution” parents, and the split in ideology between the two groups was to be a bitter source of friction that ran deep throughout the organization for decades.

### The “Institution” Parents

It’s important to understand that parents were thus not one homogenous group united as “victims” of the government’s “breach of fiduciary trust,” as implied by the class action lawsuit in 2013. The majority of parents in OAMR over these important decades, from the 1950s up to the closure in 2009, *supported the institution*, and often defended Orillia staff and administration even in the face of abuses.

The Institution parents believed the institution could be the best place for many disabled



children, where they would be given special education and medical care, and “be with their own kind.” In 1960, the Ontario Association presented a brief to Cabinet urging for a 1000-bed “small” institution in Ontario.

### The “Community” Parents

The Community parents wanted the closure of institutions and the money saved spent on services for children to be raised at home. All the more so since the United Nations Assembly’s Declaration on the Rights of the Retarded Persons in 1971 had stated that a mentally

retarded person had the “same rights as other human beings.” At that time a powerful radical idea.

Betty Anglin, a leader of the Institution parents, conducted a survey of facilities in Canada from 1963-1967, showing that conditions were indeed damning—children “lost in the crowd, denied the personal touch,” with “scratches and missing teeth.” They no longer had any protection, she wrote, “threats and terror take over.” Yet parents looked the other way and continued to

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leave their children in Orillia, including Anglin herself, whose son remained in Cottage B. The parents wanted Orillia to continue as a “last resort,” and agreed with Anglin that “*the large institutions will always be with us,*” despite abuses.

### “The Retarded Child and His Family”

The criticism of institutionalization by Community parents was a new phenomenon in the field of mental retardation, and attracted the attention of Dr John Fotheringham, Director of the Mental Retardation Clinic in Toronto.

Fotheringham and colleagues Mora Skelton, chief social worker, and psychologist Bernard Hoddinott, decided to undertake a study to investigate the benefits of institution versus home for the child. They followed the progress of two groups of mentally retarded children of comparable age, sex, and intelligence (average IQ 49). There were 116 “institutionalized” children, including 26 wards of the Children’s Aid Society, placed in Orillia, and 38 “community” children who lived at home. They and their parents were studied from June 1965 to June 1966, with the cooperation of the administration and staff of Ontario Hospital School, Orillia.

A family, whose son “Martin,” age six, had been aggressive at home, was finally put in Orillia, since the parents were “at breaking point.” He once threw a bottle of cleaning fluid at his little sister who was consequently hospitalized for seven hours in an emergency ward. The parents felt forced to decide: “The only answer is to have him admitted to Orillia.”

Fotheringham found that all parents struggled with precisely the same difficulties. For both groups, the child was “a stress on the family.” Fotheringham found that 33% of Institution children were excluded from public school, while only 5% of Community children living at home were. This was the main reason parents gave for putting their child in Orillia, as the stress of having to supervise a retarded child all day was too much.

Down’s syndrome, or “Mongolism” as it was known, in a child further influenced parents’ choice more readily. Again, the family’s perception of the child as a social stigma created fur-

ther isolation for the parents. Marital relationships were also less adequate in the Institution families, parents claiming stress. Fotheringham found that the general relationship between Institution parents and their retarded child was less adequate than in the Community parents group, not just for the retarded child but for all their children.

The main complaint from parents raising a retarded child at home often rose from the severity of the child’s problems. The Institution parents suffered more stress due to their children being less socially mature, more disruptive, and considered “discipline problems.” This meant increased amount of care and super-

vision needed from parents. The mother would be unable to have a job or career, forced to stay at home to provide constant child-care, creating further inability to cope. The removal of the child to the institution should therefore result in improved family functioning, Fotheringham reasoned, and this did seem to be the case.

The lack of government services finally influenced the decision to institutionalize. Overall, parents who chose institutionalization were less able to cope, feeling forced to make that decision.

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By allowing parents full anonymity, Fotheringham enabled them to express themselves freely for the first time. The most pow-



erful reason parents gave for institutionalizing was that the retarded child often caused “disruption” in the family, seriously interfering with their lives, with resulting exhaustion. Suddenly parents veer off, passionate, intense:

“I feel like screaming all the time!”

“We can’t go anywhere! We can’t cope any longer.”

“I can’t stand it another minute!” cries another. She’s afraid she is going to have a nervous breakdown because of the stress of raising a handicapped son.

“He’s the cause of all our quarreling all the time.”

The pain goes on and on—constant interruptions in the daily life of the family – inability to sleep at night—unsatisfactory marital relations which were only getting worse. Fear of mental break-down.

A family, whose son “Martin,” age six, had been aggressive at home, needing an inordinate amount of care, was finally put in Orillia, since the parents were “at breaking point.” He once threw a bottle of cleaning fluid at his little sister who was consequently hospitalized for seven hours in an emergency ward. The parents felt forced to decide: “The only answer is to have him admitted to Orillia.”

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A year later, Fotheringham followed through, again interviewing the parents. The expectation was that the functioning level and home conditions of the Institution families, relieved of the burden of raising their child, would improve. Yet one of the startling findings of the study was that “families do not always find the relief they ex-

pect by institutionalizing their retarded children.”

Parents’ responses were equally intense, even poignant. Parents began to “have a life” without the retarded child at home. Some resumed their romance of long ago. However, Community parents who kept their retarded children at home felt that, as time went on, family functioning suffered. The longer a family had a retarded child at home, Fotheringham noted, the greater the stress and need for services. In particular,

stress on the siblings increased the longer the child remained in the home. Care of the siblings was “less than adequate” among Community families, and some siblings “greatly resented” the attention given the retarded child.

In his final conclusion, Fotheringham found the milieu of the Orillia institution “relatively depriving as compared with our concept of the average home.” He notes: “The hospital at Orillia was large, impersonal, routine, and it suffered from frequent staff changes,” having a detrimental effect on children’s functioning.

Despite this, Fotheringham remained non-judgmental of Institution parents, and sensitive to the issues of both groups. All parents had their problems and crosses to bear, he noted, even those relieved of the burden of raising their children themselves. Depression and loneliness was pervasive in such families, due to the child having been put away. Some marital relationships got worse. One couple, who had always blamed their retarded son for their problems, found that when he was gone they basically detested each other.

The final decision to put one’s mentally retarded child in Orillia, observed Fotheringham, was the “end of an extreme” for some parents, when all else had failed. After Martin’s committal, for instance, his parents found they were now happier in their marriage. They went bowling; they were more relaxed. The mother feels she knows happiness for the first time. But even though Martin was put away, problems and stresses were not over, just different. At Orillia, Martin’s IQ dropped to 32. He received minimal training on his ward. After a home visit he balked at returning to Orillia, and had to be carried screaming and yelling from the car to the door of the institution.

This, surely, is the heart of anguish of the parents, the quiet tragedy of Orillia that Fotheringham touched upon. Regardless of which path parents chose, all suffered from

that “chronic sorrow” that follows them for as long as the child lives, and even long after to the very end of their lives.

## References

- Hincks, Clarence. *Feeble-Mindedness in Canada: A Serious National Problem*. Social Welfare 1 (February 1919): 103-104.
- Fotheringham, John, Mora Skelton and Bernard Hoddinott. *The Retarded Child and His Family*. Toronto: Ontario Institute for Studies in Education, 1971.
- Skelton, Mora. Personal communication with John Fotheringham, summer 1992, The Mental Retardation Clinic. *TPH: History and Memories of the Toronto Psychiatric Hospital, 1925-1966*. Ed. Edward Shorter. Dayton, OH: Wall & Emerson, Inc. 1996.
- Wheatley, Thelma. *And Neither Have I Wings To Fly: Labelled and Locked Up in Canada’s Oldest Institution*. Inanna Publications, 2013.
- Thelma Wheatley is the author of a creative non-fiction book on the Orillia institution for mentally retarded children between 1976-2009, known as “Orillia,” but originally called The Asylum for Idiots and Feeble-Minded, later Ontario Hospital School, and today Huronia Regional Centre: And Neither Have I Wings To Fly: Labelled and Locked Up in Canada’s Oldest Institution, Inanna Publications, 2013. The book won the Bronze Medal, IPPY AWARDS (Independent Publishers) 2014 in Psychology and Mental Health. It was also short-listed for the WALES BOOK OF THE YEAR AWARD, Creative Non-Fiction, 2014, UK. It was voted as the “must read” book out of the entries on BBC WALES. Thelma is also the author of a book on raising her autistic son: My Sad Is All Gone: A Family’s Triumph Over Violent Autism, 2004, re-printed by Inanna Publications in Fall, 2014. Thelma lives in the Greater Toronto area. www.Thelmawheatley.com*