

**THE NATION'S GARDENERS:
SOCIAL WORK PROFESSIONALIZATION AND INTERPRETATION
WORK IN SCIENTIFIC ADOPTION PRACTICE, 1930-1960**

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A dissertation submitted to the Faculty of Graduate Studies in
partial fulfillment of the requirements
for the degree of
Doctor of Philosophy

Graduate Programme in Sociology
York University
Toronto, Ontario

January 2016

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Abstract

This dissertation examines the relationship between scientific knowledge, social work and the social practice of adoption in Ontario, from 1930-1960. It focuses on the role of social workers in public agencies, specifically the Protestant Children's Aid Societies in Ontario, and voluntary relinquishments by unmarried mothers, within social welfare history. The study uses adoption as a site to explore the professionalization of social work and maintains that adoption was important as a "professionalizing project" of social workers.

Existing scholarship on the growth of scientific expertise and the professions often overlooks the co-operative work required to "make science work." By contrast, this study shows how social workers strengthened their own position by integrating developments in science, psychology and medicine in the management and assessment of adoptions. The dissertation interrogates the processes through which professional adoptions became the norm, by focusing on the processes of translation, interpretation work and boundary work in adoption. These are analyzed as strategies that social workers used to improve their position within the "system of professions" and make adoption "governable."

The scientific approaches that came to shape social work practice and adoption were shaped by and contributed to nature-nurture debates, challenging narrow hereditarianism. Psychology and child development theories were used by social workers to assess the potential adoptability of children, the "fitness" of mothers and

suitability of adoptive parents, leading to the creation of a new social category--the unadoptable child.

This study contributes to sociological research in science studies and forms of governance that structured the development of social services. The rise of scientific adoption practice in the post war period coincided with changing notions of the family and the rise of the therapeutic state. The strategies of professionalization used by social workers helped to popularize new forms of knowledge and strengthen the link between the state and “bio-medical” authority in family making. The study of adoption raises important questions about the extent to which scientific knowledge and techniques can be used as a basis for discerning social obligations and collective responsibilities for those defined as strangers or kin.

Acknowledgements

The completion of this thesis was made possible by the support of many people along the way. I want to first thank my supervisory committee for combining their strengths and providing unwavering support over the years. Kate McPherson shared her intellectual insights and practical wisdom on how to work with archival data. She encouraged me to get the story down first and continued to believe I had an original contribution to make. Jan Newson gave me detailed feedback and asked critical questions about the meanings of professionalization and science as a social practice. She reminded me on more than one occasion to be clear about who was doing the acting, and I thank her for that. Penni Stewart was a generous and encouraging supervisor. She re-energized my work at a key point in the writing process and deftly balanced guidance while demonstrating what it means to be part of a collaborative process.

I also want to acknowledge members of the external examining committee, Paula Maurutto, Molly Ladd-Taylor and Lorna Erwin, for helping me to see my work with fresh eyes. They asked important questions about audience and provided direction for going forward.

In the early stages of my research, I received friendly and expert assistance from a number of people including: archivist Joseph Solovitch, and co-ordinator Dora Iriotakis of the Archives of Ontario; Deborah Goodman of the Children's Aid Society of Toronto; and archivist George Wharton, of the Metropolitan Toronto Archives. During my time at York University, I also received invaluable assistance from Audrey Tokiwa, Graduate Program Administrator in the Sociology Department.

It is impossible to overstate the value of conversations shared with fellow graduate students and teachers over the years; many have since become close friends. Susanne Klausen, Catherine Phillips, and Emma Whelan shared their written work and bibliographic resources very early on. I was fortunate to have been part of a lively community at York University where friendships were formed talking about teaching, politics, food and theory. My thanks for past and ongoing relationships goes to Gamal Abdel-Shehid, Zeldia Abramson, Kate Anderson, James Beaton, Kym Bird, Martin

Cannon, Rachel Epstein, Beth Jackson, Kate Kaul, Fuyuki Kurasawa, Clarice Kuhling, Frances Latchford, Mark Lede, Tara Milbrandt, Eric Mykhalovskiy, Mary-Jo Nadeau, Carlos Neves, Andie Noack, Suzanne Peters, Frank Pearce, Natasha Pravez, Rebecca Raby, Katia Rukszto, Lachlan Story, and Lorna Weir. Warm thanks also to friends outside of York, Doreen Fumia and Catherine Phillips, who understood the graduate school experience (while parenting) and offered encouragement as I wrote my dissertation. I want to specifically thank Zelda Abramson, Frances Latchford and Tara Milbrandt for providing candid ongoing reassurance and practical advice.

I am especially grateful for the support I received from extended family. The entire McConnell clan, beginning with Frances and Gordon McConnell, welcomed Lauren and I into their lives nearly twenty years ago. Thanks to my in-laws Leslie and Glen Degen, Janet and Mike Watson, Anne McConnell and all of their families. Their love, escapades and practical support made living with a dissertation much more enjoyable. I also want to thank my parents Donna and Henry Phillips, particularly my mother who, despite not seeing it, encouraged me to go back to university.

During my time in graduate school I shared many adventures and significant life events with an incredible chosen family, originally formed through hockey. Much love and appreciation goes to the Jet Girls and friends Arwen Atkinson, Beth Bauman, Kim Boyle, Monica Chretien, Karen Decker, Traci Dixon, Maureen Fair, Jennifer Fraser, Kirsty Grosart, Rene Harrison, Shena Hinks, Vashti King, Marg McLeod, Jody McCurdy, Juliet Robin, Wendy Shaw, Dawn Smith, Wendy Taylor, Laura Tobias, Kathleen Urdahl, Patty-Anne Valenti, Deb Vanderwater, and Krysta Whitney.

From the beginning my daughter Lauren has shown understanding and insight beyond her years. She surprised me many years ago, on a road trip, affirming proudly that I was ‘taking the long way’ home. She has taught me a great deal about making room for community and creativity.

Finally, I want to thank my partner Sara McConnell for her unbounded energy, love and support. She stood beside me every step of the way and travelled every detour. Her generous spirit and understanding made writing possible and her enthusiasm fills up everything we do together.

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Introduction

“Rear-View Mirror”: Rethinking Scientific Adoption Practice

“Child for Adoption--The infant found in the basket on the Fergus and Orangeville road in West Garafraxa is now offered for adoption. It is a healthy male child about five or six weeks old.”

Fergus News Record 11, June 1891

In recent years medical experts and Children’s Aid Societies have raised alarms about the approximately 40, 000 children living in institutions in Canada and one cannot help feeling a sense of déjà vu.¹ Nearly 60 years ago the same concerns were raised about the growing number of children made wards of the state living in institutions.² A series of reports identified problems that would continue to be articulated thereafter. The Ontario Association of Children’s Aid Societies (OACAS) described chronic underfunding, growing caseloads, and a need for more professionally trained social workers.³ A Ministerial Committee and a panel of experts commissioned by the Ontario Government called for greater regulation and standardization of services.⁴ Public officials cited inconsistency in (CAS) agency practices and variations in their definitions of adoptability as central problems in the rational delivery of services.

¹ Laura Eggertson, Noni MacDonald, Cindy L. Baldassi, Paul C. Hébert, Ken Flegal, and Joan Ramsey, “Every Child Deserves a Home.” Editorial. *CMAJ* 181, no.12 (December 2009): E265-E266; Jeff Denault, “Policy Brief: Adoption and Foster Care in Canada,” 3: Canadian Welfare League of Canada/LBEC, 2012; Martin Regg Cohn, “Ontario must work to streamline adoptions,” *Toronto Star, Guelph Mercury* (October 2014): A11.

² Ontario Association of Children’s Aid Societies (hereafter cited as OACAS), “A Study of the Disposition of Permanent Wards as of October 1st, 1959,” (1959): 1, Archives of Ontario, Toronto (hereafter cited as AO) RG 29 Deputy Minister’s Files; “Childcare and Adoption Services,” *Report of the Ministry of Community and Social Services*, (1951), (AO) RG 29-01-410 Deputy Minister’s Files; Harold Treen, “Study of Permanent Wards of 55 Children’s Aid Societies in the Province of Ontario,” (1963): 1-27 (AO) RG 29-01-501 Deputy Minister’s Files.

³ Hereafter the Children’s Aid Society will be cited as the CAS.

⁴ OACAS “Disposition of Permanent Wards”; “Childcare and Adoption Services”; Treen, “Study of Permanent Wards,” 1-27.

Professionally trained social workers had to respond. As employees of the semi-public Children's Aid Societies, social workers had relatively recently secured legislative authority over *all* adoption placements, acting as the official representative on behalf of the Province and receiving public subsidies to manage the public adoption system.⁵ Scholars working in a range of disciplines have observed that during and after World War II social workers took ownership for managing adoptions, but few have interrogated the processes, key to this dissertation, by which professional adoptions became the norm.

Throughout the 1940s and 1950s, social workers tried to consolidate their status as legitimate overseer of modern, professional adoption by establishing their practices as scientific, in contrast to the ad hoc practices of charity workers and amateurs. Social workers within the Ontario CAS' secured a key role amongst the historic participants in adoption: the provincial state, the medical profession, adoptive and birth parents, and charitable organizations.⁶ They became what Michel Callon calls "obligatory passage points" because all adoptions had to "pass through" them and be approved by the CAS.⁷

Contemporary social work scholars argue that the "standard" histories of the profession leave out the ways that "women's dominance" in the field shaped the character of social work, especially the effects of "embracing" social and medical

⁵ Gail Aitken, "Critical Compromises in Ontario's Child Welfare Policy," in *The Canadian Welfare State: Evolution and Transition*, ed., Jacqueline S. Ismail (Edmonton: University of Alberta Press 1987), 274-299; Ralph Garber, *Disclosure of Adoption Information* (Toronto: Ministry of Community and Social Services, 1985).

⁶ Nikolas Rose introduced the abbreviated term "psy" as a way to include the discourses of psychology, psychoanalysis, and psychiatry. See: Nikolas Rose, *The Psychological Complex: Psychology, Politics and Society in England, 1869-1940*. London: Routledge and Kegan Paul, 1985.

⁷ Michel Callon, "Some elements of a sociology of translation: domestication of the scallops and the fisherman of St. Briene Bay," in *Power, Action and Belief: A New Sociology of Knowledge*, ed. John Law (London: Routledge, 1986), 196-233.

science.⁸ This dissertation analyzes the rise of scientific adoption as an important professionalizing project of Ontario social workers during the 1940s through 1950s. Using the case study of Ontario social workers, I interrogate the strategies social workers used, as non-scientists, to define scientific adoption practice and assert their own professional knowledge and authority in defining “fit families” and producing a “healthy” nation. I show how social workers participated in the formation of the therapeutic welfare state and strengthened it by drawing on new forms of knowledge, and forming alliances with knowledge-based professions.

In the late nineteenth century, “child-saving” had emerged as a pressing social issue, uniting a number of middle-class social reformers and philanthropists.⁹ Between 1880 and 1920, the horrors of “baby-farming” and the commodification of children, through indenture-like fostering practices and ware-housing in industrial schools, led to demands by the lay public, philanthropists, and professionals to reform child welfare services and adoption practices.

Only two decades later, after WWII, adoption was re-defined as both a social problem and a comprehensive solution to other social problems that threatened the family and national efficiency. Social workers criticized “unregulated” adoptions undertaken by entrepreneurs, private individuals, and charitable organizations, as dangerous and prone to failure.¹⁰ Private adoptions were called a social problem because

⁸ Laura Epstein, “The Culture of Social Work” in *Reading Foucault for Social Work*, ed. Adrienne Chambon, Allan Irving and Laura Epstein (New York, Columbia University Press: 1999), 15.

⁹ John Bullen, “J.J. Kelso and the “New” Child-Savers: The Genesis of the Children’s Aid Movement in Ontario.” *Ontario History* 82, no. 2 (1990): 107-28.

¹⁰ Robert L. Evans, “The Danger of Unsupervised Adoptions,” *Coronet*, July 1949; “Protected Adoptions,” *Toronto Star*, July 21, 1949 (AO) RG 29-1-770; Charlotte Whitton, “Better Adoption Controls Needed When Babies Cross Borders,” *Saturday Night* (June 12, 1948). (A0) Box 17 F819 OACAS Files.

they were subject to the “perils of money” and “sentiment.”¹¹ Social workers proposed an alternative: scientific adoptions managed by professional child-placers as a solution to the joint problems of childlessness and illegitimacy.

During the immediate postwar period Ontario social workers still had to promote their own public services against private or “grey market” practices conducted by doctors, lawyers, and religious organizations.¹² Over half of all unwed mothers and adopting parents still used private or religious services, and for a variety of reasons some preferred to do so. Outspoken social work leaders like Charlotte Whitton, secretary of the Canadian Welfare Council (CWC), criticized older practices highlighting their inefficiency, subjectivity, and outright incompetence, creating a demand for standardized placements by “real social workers” in place of “ministers” and other community leaders.¹³ She went on to write an influential, national report documenting widespread abuses in the province of Alberta.¹⁴ The exposure of a gap in the delivery of child welfare services provided public social workers an opportunity to

¹¹ Ellen Herman, *Kinship by Design: A History of Adoption in the Modern United States* (Chicago and London, University of Chicago Press: 2008), 1.

¹² Patti Phillips, “Financially irresponsible and obviously neurotic need not apply”: Social Work, Parental Fitness, and the Production of Adoptive Families in Ontario, 1940-1965,” *Histoire sociale/Social History* 39, no. 78 (2006): 329-358.

¹³ The nature of these criticisms is explored throughout the thesis, particularly, the profession of social work’s response to them. Ellen Herman, “The Paradoxical Rationalization of Modern Adoption,” *Journal of Social History* 36, no. 2 (2002): 349; Charlotte Whitton. “The Times Test: The Children’s Aid.” *Canadian Welfare*. 17, no. 3 (July 1941): 6-8; “Minutes to the Board of Managers,” March 1942 (MTA) Infants’ Homes of Toronto fonds 1404, Series 855, File 4. Police officers and other officials often took in orphaned children. Strong-Boag also describes this practice in: Veronica Strong-Boag, *Finding Families, Finding Ourselves: English Canada Encounters Adoption from the Nineteenth Century to the 1990s* (Toronto, New York: Oxford University Press, 2006).

¹⁴ Stuart Jaffary, “Welfare in Alberta.” *Canadian Welfare* (15 October 1948): 11-19.

redefine their identity and to insert themselves in the system of professions, within the expanding therapeutic state.¹⁵

Historians argue that during the post WWII period, adoption became modern by being therapeutic--what adoption historian Ellen Herman calls “kinship by design.”¹⁶ The design paradigm captures how adoption went from being an unregulated practice in the early 1900s to something that required “skilled management and specialized knowledge.”¹⁷ Researchers, clinicians, leaders in professional fields, religious orders, and ordinary people all participated in kinship by design. Laura Epstein describes an overall shift in social work practice in Ontario, as it moved from clinical, to technical practice based on ideas in social science.¹⁸

Scientific or modern adoption, based on knowledge and techniques, was supposed to reduce the risks associated with stranger adoptions to make them “safe, natural and real” and produce “good citizens” that would make “parents proud.”¹⁹ The official goal was to reduce the uncertainty of family formation, so that gradually the

¹⁵ Andrew Abbott, *The System of Professions: An Essay on the Division of Expert Labor*. Chicago and London: University of Chicago Press, 1988.

¹⁶ Herman, *Kinship by Design*, 1. The terminology can be confusing because both historians and postwar social workers refer to *modern* adoption as professional and scientific, using the three terms interchangeably, or to help define the other, while at the same time using the term modern to refer to an era of adoption that remains today.

¹⁷ Herman, *Kinship by Design*, 1.

¹⁸ Epstein, “The Culture of Social Work,” 3-26; Herman, *Kinship by Design*, 2. The therapeutic shift has been documented in western countries such as Canada, the United States and United Kingdom, though there were differences in the degree and power of the Catholic Church in shaping social policy in Ireland just as there was in some Canadian provinces. The impact of the therapeutic shift for adoption practice remains understudied in Canada.

¹⁹ Herman, *Kinship by Design*, 2. Patti Phillips, “‘Blood Not Thicker Than Water:’ Adoption and Nation-Building in the Post-War Baby Boom,” (master’s thesis, Queen's University, 1995).

values of rational planning and “prediction...shaped professional and popular opinion of practices that distinguished good adoptions from bad.”²⁰

Although interventions into family life were not new, Canadian historian Joy Parr insists that we still need to pay attention to what is unique about “time and place...economic needs, social priorities and the exercise of power” including the *types* of interventions that are introduced.²¹ The postwar period is described as a *watershed* in both the history of adoption and the history of social work.²² Herman and others contend that the move to rationalize adoption ushered in a profound “social revolution” as it became more “natural” for people to form families through adoption, as the state was legitimately allowed to intervene in the affairs of the family without appearing to contradict the values associated with the liberal state.²³

Since the 19th century, one of the legal problems of the liberal state was how to build a legal basis for intervention into *some* families that “[did] not convert *all* families into clients of the state.”²⁴ The family was supposed to remain autonomous as the primary site of responsibility for children, but there was a need for social workers to intervene when families “failed” in this task. Parton argues that a balance was needed

²⁰ Herman, *Kinship by Design*, 2.

²¹ Joy Parr, “Introduction,” in *Childhood and Family in Canadian History*, ed., Joy Parr (Toronto: McClelland and Stewart Limited, 1982) 7-16; Ellen Ross, *Love and Toil: Motherhood in Outcast London, 1870-1918*. New York and Oxford: Oxford University Press, 1993.

²² Wayne Carp and Anna Leon-Guerrero, “When in Doubt, Count: World War II as a Watershed in the History of Adoption,” in *Adoption in America: Historical Perspectives*, ed., Wayne E. Carp (Ann Arbor, University of Michigan Press, 2002), 181-217; Karen Murray, “Governing ‘Unwed Mothers’ in Toronto at the Turn of the Twentieth Century,” *The Canadian Historical Review* 85, no.2 (2004): 253-276; Alan Irving, “The Scientific Imperative in Canadian Social Work: Social Work and Social Welfare Research in Canada, 1897-1945,” *Canadian Social Work Review* 9, no.1 (1992): 9-27.

²³ Herman, “Paradoxical Rationalization,” 341; Nigel Parton, *Governing the Family: Child Care, Child Protection and the State*. New York, St. Martin's Press, 1991; Nigel Parton, “The Nature of Social Work under the Condition of (Post)Modernity,” *Social Work and Social Sciences Review* 5, no.2 (1994): 93-112.

²⁴ Parton, *Governing the Family*, 2.

between too much and not enough intervention that could not simply be handled by law. New practices within the professions were called for, particularly *social work*. By the 20th century, science was “elevated” to a place inside family formation as “impartial” technical means were used to determine *parental suitability* and the *adoptability* of children from those who were relinquished for adoption.²⁵

Moreover, gender and social historians have shown that the state was not the only agent of history; religious, voluntary, and professional groups continued to play a significant role in constructing cultural assent.²⁶ The licensing and provision of professionally managed services allowed the state to govern the health of citizens without simply relying on disciplinary means. Even though, in both the United States and Canada, there were contradictions in the aims of the federal or provincial governments and social service providers, a “delicate” partnership began to form based on a “shared vision of statism, professional responsibility to ‘interpret’ delicate social operations like adoption, and overlapping personnel at very high levels.”²⁷

The emergence of scientific adoption can, thus, be analyzed as part of four broader and interconnected processes that have been conceptualized by sociologists and historians: *welfarism, professionalization, therapeutism and biomedicalization*.

²⁵ Herman, "Paradoxical Rationalization," 370; Phillips, "Financially irresponsible," 329-358.

²⁶ Mariana Valverde, *The Age of Light, Soap and Water: Moral Reform in English Canada, 1885-1925* (Toronto, McClelland and Stewart, 1991), 25-27; Kathryn McPherson, "Nursing and Colonization: The Work of Indian Health Service Nurses in Manitoba, 1945-1970," in *Women, Health and Nation: Canada and the United States since 1945*, ed., Georgina Feldberg, Molly Ladd-Taylor, Alison Li, and Kathryn McPherson, 223-46. Montreal and Kingston, London, Ithica: McGill-Queen's University Press, 2003.

²⁷ Herman, "Paradoxical Rationalization," 348. Chapter four examines interpretation work.

Welfarism

Interventions into family life were not new but by the early 20th century the number of charity “visitors” and the kinds of interventions increased.²⁸ A growth in the number and type of licensed interventions in the 20th century was supported by the logic of “welfarism,” which justified the intrusion of State and church in the “best interests of society.”²⁹ Paula Maurutto uses the concept of *welfarism* in two ways: to describe the growth of an interventionist state and a new way of governing social problems.³⁰ Reformers and policy-makers advocated intervention and regulation based on a shared vision of the state’s responsibility to citizens so it was assumed that “making adoption safe meant making adoption governable.”³¹ Scientific adoption was “advanced through regulation, interpretation, standardization, and naturalization.”³² Reformers, particularly social workers, used these *keywords* to describe their “own goals” but the terms also describe “four historical processes” that “transformed adoption into a manageable social problem.”³³

A number of scholars have proposed that a new conception of the “social” allowed social work to operate as a new paradigm for governing social problems.³⁴

²⁸ Parr, *Childhood and Family*, 7-16; Ross, *Love and Toil*; Margaret Little, “The Blurring of Boundaries: Private and Public Welfare for Single Mothers in Ontario.” *Studies in Political Economy*, 47 (1995): 89-109.

²⁹ Paula Maurutto, *Governing Charities: Church and State in Toronto’s Catholic Archdiocese, 1850-1950* (PhD diss, York University, 1998). Maurutto draws on Peter Miller and Nikolas Rose’s concept of welfarism.

³⁰ Maurutto, “Governing Charities,” 10.

³¹ Herman, *Kinship by Design*, 1.

³² Herman, *Kinship by Design*, 1.

³³ Herman, *Kinship by Design*, 2. These processes are described in more detail in the dissertation.

³⁴ Bruce Curtis, “Surveying the Social: Techniques, Practices, Power,” *Histoire sociale/Social History*, 35, no. 69 (May 2002): 83-108; David Howe, “Modernity, Postmodernity and Social Work,” *British Journal of Social Work* 24 (1994):513-532; Nigel Parton, *Governing the Family: Child Care, Child Protection*

Maurutto, for one, argues that social work emerged as “a *mechanism* for governing social problems” through social casework practices, defined as “*techniques* of assessment and treatment” that were adopted by both private (or religious) and public practitioners alike.³⁵

Science, as both content and practice, was a key player in the growth of welfarism and the measurement of social problems.³⁶ Ian Hacking describes it as a *feedback* effect, showing how the social and technical were linked through new information gathering technologies and methodologies at the beginning of the 20th century. He argues facts were created rather than found; “[C]ategories had to be invented into which people could conveniently fall in order to be counted.”³⁷ The systematic collection of information (like statistics) affected how we think about ourselves, our society, how we describe our neighbor, what we choose to do, and be.³⁸

At the same time, problem populations and individuals had to first be “constructed into definable categories from which knowledge [could] be formed.”³⁹ The application of “social casework [as one technique]...enabled social problems to be measured, calculated, and compared in terms of norms and abnormalities.”⁴⁰ Both religious and public agencies in Ontario focused a great deal of attention on unmarried

and the State (New York, St. Martin's Press, 1991); Jacques Donzelot, *The Policing of Families* (New York, Pantheon, 1979).

³⁵ Maurutto, “Governing Charities,” 12.

³⁶ Science, when used as a general term in the thesis, includes its broader meaning as knowledge, technologies, techniques, and practices, in keeping with recent STS analyses that simultaneously explore it as very different kind of practice and knowledge, a form of culture, power, and/or politics.

³⁷ Ian Hacking, *The Taming of Chance* (Cambridge: Cambridge University Press, 1990), 2.

³⁸ Hacking, *The Taming of Chance*, 2-3.

³⁹ Hacking, *The Taming of Chance*, 2-3.

⁴⁰ Maurutto, “Governing Charities,” 12-13.

mothers and their children as social problems, who were the subjects of (and subjected to) increased moral, social and sexual regulation.

With the growth of knowledge in the social sciences, psychology, criminology, sociology and social work, public “issues” were “conceptualized, problematized, and regulated in new ways.”⁴¹ There were “multiple players” and diverse “strategies” involved in welfarism, but they all shared the idea that “social welfare” was the domain of the state.⁴² I use the term therapeutism as an extension of welfarism that included the interplay between knowledge in the life sciences and ideas about social welfare, so that increasingly “life itself,” not just “social welfare,” was considered the domain of the state.⁴³

Therapeutism

In the 20th century, many state sponsored interventions were focused on public health and reproduction.⁴⁴ The emphasis on improving national health was heightened after decades of war and depression and increasingly “health” itself was something to be worked on and it became one’s duty to be healthy. Liberal strategies of governance were linked by “prevention” discourse--a central characteristic of the therapeutic state.⁴⁵ The rise of the therapeutic welfare state coincided with the growth of research in “the human

⁴¹ Ibid. 10.

⁴² Ibid.

⁴³ Nikolas Rose, "The Politics of Life Itself," *Theory, Culture and Society*, 18 no.6 (2001): 1-30. Adele E. Clarke, Laura Mamo, Jennifer Ruth Fosket, Jennifer R. Fishman, and Janet K. Shim “Biomedicalization: A Theoretical and Substantive Introduction,” in *Biomedicalization: Technoscience, Health, and Illness in the U.S.* ed., Adele E. Clarke, Laura Mamo, Jennifer Ruth Fosket, Jennifer R. Fishman, and Janet K. Shim (Durham and London: Duke University Press, 2011), 1-44; Giorgio Agamben, *Homo Sacer: Sovereign Power and Bare Life* (Stanford, CA: Stanford University Press, [1995] 1998).

⁴⁴ Rose, "Politics of Life," 1-30.

⁴⁵ Epstein, “The Culture of Social Work,” 3-26.

and medical sciences” in addition to “the expansion of psychological authority over sickness and health.”⁴⁶

While the term therapeutic government includes the “operations of the welfare state” it extends to other “forms of managerialism” and professionalism.⁴⁷ Defined as a more benevolent and “gentle” form of government, emphasis is placed on self-regulation, normalcy and objective administrative techniques that protected people from their own “ignorance.”⁴⁸ Just as today there is a focus on “risk factors” and “at risk” populations, there was (and continues to be) a focus on children’s bodies.⁴⁹

Therapeutism was advanced through the actions of state officials, professionals, parents and ordinary people, and as a “non-partisan” activity it co-existed with debates about the size of government.⁵⁰ People and populations were managed through “prevention, protection, instruction and help” rather than blame and punishment, carrying over the humanist ideas of people like J. J. Kelso (founder of the Ontario CAS) that reform of individuals was possible.⁵¹ At the same time, liberal and illiberal practices of power co-existed in liberal welfare states and punitive practices never really disappeared with the spread of prevention discourse, especially for certain social groups (e.g. mothers who were poor, unmarried, immigrant, and/or First Nations.)

⁴⁶ Herman, *Kinship by Design*, 12; Epstein, “The Culture of Social Work,” 3-26.

⁴⁷ Herman, *Kinship by Design*, 11; Laura Epstein, “The Therapeutic Idea in Contemporary Society,” in *Essays on Postmodernism and Social Work*, ed. Adrienne S. Chambon and Allan Irving (Toronto, Canadian Scholar's Press Inc., 1994), 3-18.

⁴⁸ Herman, *Kinship by Design*, 12.

⁴⁹ Herman, *Kinship by Design*, 12. Andre Turmel, *A Historical Sociology of Childhood: Developmental Thinking, Categorization and Graphic Visualization* (Cambridge: Cambridge University Press, 2008) np.

⁵⁰ Herman, *Kinship by Design*, 12.

⁵¹ Xiaobei Chen, “Cultivating Children as You Would Valuable Plants: The Gardening Governmentality of Child Saving, Toronto, Canada, 1880s-1920s.” *Journal of Historical Sociology* 16, no. 4 (December 2003): 460-86; Ellen Herman, *Kinship by Design*, 12.

Therapeutism was an outgrowth of wider historical trends in science such as the growing dominance of the developmental paradigm and probability studies. Turmel defines the period between 1850-1945 as the “apex of the developmental paradigm,” a term not limited to its psychological meaning, but to a social paradigm that assumed all societies progressed along a similar path and stages of development.⁵² New measurement and recording technologies made comparisons within the population possible and the transformations of scientific practice in different areas subsequently had an effect on those who produced knowledge about children.⁵³

Statistics and population studies facilitated the “elaboration” of the “norm of development” as comparisons and distinctions within the population were made possible.⁵⁴ The child became an object of scientific knowledge and researchers tried to measure and define the “precise distinctions” that made the child different from other social actors. The “normal child” was talked about as a cognitive being by doctors and parents, but it was also an “administrative device” to justify official actions and practices.⁵⁵ Once the child was conceived of as a distinct entity in the national population, “public authorities expressed concern for all but a few children” and questions emerged around the problems of “delinquency” and the construction of “new citizenship.”⁵⁶ It was a short step to connect the problem of delinquency with unmarried motherhood and other non-normative family formations.

⁵² Turmel, *Historical Sociology of Childhood*, 2-3.

⁵³ Andre Turmel, “Childhood and Normalcy: Classification, Numerical Regularities, and Tabulations,” *International Journal of Education Research* 27, no. 8 (1998): 662.

⁵⁴ Turmel, *Historical Sociology of Childhood*, 4.

⁵⁵ *Ibid.*, 13-14.

⁵⁶ Turmel, *Historical Sociology of Childhood*, 13; Turmel, “Childhood and Normalcy,” 661.

The relationship between “developmental standards” and “technologies of regulation [brought] about three different forms of normalcy: the normal child as average, as healthy and as acceptable.”⁵⁷ Even though “normality” remained a disputed idea, the regularities that were measured began to shape ideas about what a “normal child” should look like “physically and mentally,” and they would later be reflected in “failed” and “wrongful” adoption cases.⁵⁸ Ideas about childhood normalcy also shaped definitions of ideal motherhood and the science of motherhood. According to Turmel, actors in the “childhood collective” were always on the look out for “new criteria” to assess and determine “suitable” relations between adults and children.⁵⁹ He calls it a recursive process because when parents, teachers, and experts started to behave according to developmental standards, they helped to stabilize the collective through shared ways of thinking and acting.

The desire to eliminate the uncertainty of modern life and positively shape the future elevated the values of “prediction and control,” and these values came to dominate adoption.⁶⁰ But as many scholars have also noted, armed with new scientific resources middle-class reformers were ultimately engaged in social engineering to control the “undesirable behaviours” of the “under-class,” through the “medical regime” and other forms of regulation--including adoption.⁶¹

⁵⁷ Turmel, *Historical Sociology of Childhood*, 13.

⁵⁸ In chapter five, I describe the case of a failed adoption, I call the case of Lily. Turmel, *Historical Sociology of Childhood*, 14.

⁵⁹ Turmel, *Historical Sociology of Childhood*, 14.

⁶⁰ Herman, *Kinship by Design*, 2; Turmel, *Historical Sociology of Childhood*, 2-3.

⁶¹ Turmel, “Childhood and Normalcy,” 663; Carp and Leon-Guerrero, “When in Doubt, Count,” 181-217.

Social workers as a group contributed to the childhood collective by delineating the parameters of what made the *adoptable* child distinct from the *unadoptable* child, and what defined *fit* and *eligible* adoptive couples (parents). Social work leaders tried to distinguish their own form of specialized knowledge and practice, to persuade officials, experts, and the public that they could tell the difference between “good” and “bad” adoptions and make sound placements.

Social workers acted as *mediators* and not simply intermediaries who applied the knowledge of other experts in a “linear” fashion. They contributed to the science of childhood and motherhood and shaped the experiences of motherhood, childhood, and family life in myriad ways. Scientific adoption practice had a lasting impact on the social relationships between actors by contributing to the production of knowledge about “normal” childhood and family life. Adoption altered the social and symbolic landscape, as the “little stranger” on the “doorstep” became emblematic of everything that defined the “Other.”⁶²

Professionalization

The dominant perspective used to explain adoption and social work history is professionalization, usually located as one of three interrelated processes:

⁶² The “little stranger” was the title of an 1886 news story in the *Fergus News Record* reporting on a ten day old baby that was left in a basket in a hotel lobby with a note stating the mother was too poor to look after it. Cases like this one help to identify the origins of the term “doorstep babies”, which persisted well into the 20th century in Canada. I am indebted to Donna Varga’s idea of the child as Other, in her discussion of the relationship between child development studies and colonial discourse. Donna Varga, “LOOK -- NORMAL: The Colonized Child of Developmental Science,” *History of Psychology* 14, no. 2 (2011): 149.

“professionalization, modernization, and bureaucratization.”⁶³ The concept of professionalization has been understood in various ways by scholars to refer to a paradigm, an ideology, a set of strategies, and a social movement.⁶⁴ Conventional accounts of social work history in English Canada have tended to equate modernization with the processes of professionalization, scientization, and secularization.⁶⁵ Debates about these processes have influenced much of the scholarly work on social work and adoption.

Sociologists have also begun to challenge conventional ideas about the evolutionary nature of the welfare state and the division between religious and secular organizations.⁶⁶ Maurutto and MacDonald have shown that the professionalization of social work did not lead to the decline of *private* religious charities. They argue that religious bodies were on the forefront of cultural change as they integrated social work methods and scientific casework *techniques* in charitable service delivery.⁶⁷ According to Maurutto, as the welfare bureaucracy expanded, links with Catholic and other non-

⁶³ Herman, *Kinship by Design*; Wayne Carp and others describe the same processes. Wayne Carp, *Family Matters: secrecy and disclosure in the history of adoption* (Cambridge, Mass., Harvard University Press, 1998).

⁶⁴ Tracey L. Adams, "Professionalization, Gender and Female-Dominated Professions: Dental Hygiene in Ontario," *The Canadian Review of Sociology* 40, no. 3 (2003): 269; Strauss and Bucher describe segmentation within a profession as a social movement. See: Anselm L. Strauss and Rue Bucher, "Professions in Process," in *Professions, Work and Careers*, ed., Anselm L. Strauss (New Brunswick: Transaction Books, 1975) Reprint, *The American Journal of Sociology* 66 (January 1961).

⁶⁵ Theresa Jennissen and Colleen Lundy, *One Hundred Years of Social Work: A History of the Profession in English Canada, 1900-2000* (Waterloo: WLU Press, 2011).

⁶⁶ Irving, "Scientific Imperative," 9-27; Pitsula, James. "The Emergence of Social Work in Toronto." *Journal of Canadian Studies* 14, no.1 (1979): 35-42; James Struthers, "Lord Give Us Men": Women and Social Work in English Canada, 1918-1953," in *The Benevolent State: The Growth of Welfare in Canada*, ed., Allan Moscovitch and Jim Albert (Toronto: Garamond Press, 1987) 126-43; James Struthers, "A Profession in Crisis: Charlotte Whitton and Canadian Social Work in the 1930s," in *The Benevolent State*, 111-125.

⁶⁷ Maurutto, "Governing Charities," 80-97. Heidi MacDonald, "Maintaining an Influence: The Sisters of Saint Martha, Charlottetown, Respond to Social and Religious Change, 1965-85," *Atlantis* 32, no.1 (2007): 91-99.

profit organizations became stronger and were “entrenched” within the welfare state.⁶⁸

Future research is needed to investigate the way that religious organizations in English Canada participated in kinship by design, building on Andrée Lévesque’s original contribution on the province of Quebec.⁶⁹

Mariana Valverde has also challenged the secularization thesis by introducing the concept of the “mixed economy” to capture the fact that the State has historically depended on a mix of public and private funding in the delivery of social services (financial, administrative and social) and continues to do so today.⁷⁰ The history of the Children’s Aid Societies was a chronic struggle for government funding along with battles between different levels of government over public responsibilities. As Maurutto pointed out, the regulation and funding of charities by the State was in itself not new but the “perception” of independence was an effective “instrument” of the state because it meant the poor could not claim relief as a “right,” hiding the reach of State intervention.⁷¹

The private administration of relief meant that charity workers determined who was “deserving” and undeserving of services, a practice that was supposed to change with the introduction of modern, scientific, secular professional practices. However, Margaret Little has shown that scientific objectivity did not replace “subjectivity” within secular organizations; moral concerns were never completely exorcized from

⁶⁸ Maurutto, “Governing Charities,” 9.

⁶⁹ Andrée Lévesque, “Deviant Anonymous: Single Mothers at the Hôpital de la Miséricorde in Montreal, 1929-1939,” in *Rethinking Canada: The Promise of Women’s History*, ed., Veronica Strong-Boag and Anita Clair Fellman (Toronto: Copp-Clark Pitman, 1991), 322-336.

⁷⁰ See Mariana Valverde, “The Mixed Social Economy as a Canadian Tradition,” *Studies in Political Economy* 47 (1995): 33-60; Margaret Little, *No car, no radio, no liquor permit: the moral regulation of single mothers in Ontario, 1920-1997* (Toronto, Oxford University Press, 1998).

⁷¹ Maurutto, “Governing Charities,” 9.

“scientific” casework practices.⁷² Public agency social workers continued to apply a “means test” to determine who was “worthy” and “unworthy” to receive state benefits (e.g. Ontario Mother’s Allowance). Even at the end of the century, moral assumptions about unwed mothers and women’s sexuality, configured by class and race, continued to shape social policies, and social workers used the threat of adoption to ensure compliance from mothers who received benefits.⁷³ Little and Lévesque’s research demonstrates that while the symbolic view of children born “out of wedlock” may have changed during the 20th century, unwed mothers continued to be reproached because of widespread cultural assumptions about their breach of sexual, moral and social laws.⁷⁴

The mixed economy included the private, philanthropic, and religious organizations that continued to fill the gaps left by the State, as they always had, especially through the operation of mothers and babies’ homes, and the semi-private Children’s Aid Societies.⁷⁵ Private maternity homes offered an alternative to pregnant “girls” [sic] who had little family or public support, and homes in larger cities offered greater anonymity. By 1970 there were at least twenty-five maternity homes still operating in Ontario affiliated with religious institutions, such as the Salvation Army and Anglican Church.⁷⁶ Other for-profit, privately run maternity homes continued to be

⁷² Margaret Little, "The Blurring of Boundaries: Private and Public Welfare for Single Mothers in Ontario," *Studies in Political Economy* 47 (1995): 89-109.

⁷³ Little, *No car, no radio*.

⁷⁴ Little, *No car, no radio*; Lévesque, "Deviants Anonymous: Single Mothers."

⁷⁵ Valverde, "The Mixed Social Economy," 33-60; Little, "The Blurring of Boundaries." In Ontario, as in other regions of Canada, a number of Catholic hospitals were established and operated by what historians call the women religious (for example, the Sisters of St. Joseph in Ontario and Quebec; the Magdelene Sisters in Quebec, and the Sisters of St. Martha on Prince Edward Island).

⁷⁶ Garber, *Disclosure of Adoption Information*, 2. I was provided the names of some of these homes from adoption social worker Susan Peters, Easton CAS (pseudonym). Some of the examples included the

popular because they were more likely to relax their policies around religion, and were predisposed to finding adoption homes in other regions of Canada and the United States.⁷⁷

Within this context, social work was recast as having scientific foundations in order to lessen the risks associated with private adoption, but also to secure its legitimacy. The process supposedly included wresting cultural authority away from mainly female and middle-class, philanthropists, “do-gooders,” and/or charity workers, constructed as amateurs.⁷⁸ Because of women’s dominance in the field, a shift was needed away from “common-sense maternalism” to skilled social work as a “gender-blind specialization,” a challenge that Herman believes was met by the postwar “rationalizers,” modern adoption workers.⁷⁹ Social workers drew on the image of rationalized social work guided by a spirit of objective, theoretical inquiry, informed by new kinds of knowledge rather than “subjective judgments.” When popular journalists in Ontario described adoption as a modern scientific practice in the 1940s, they subscribed to and reproduced these ideals.⁸⁰ However, there are still disagreements about the seamlessness of this transition and how to measure the success of adoption modernization.

Salvation Army run Bethany Home in Ottawa, Hedgewood House in Kingston, and Vida Lodge in Toronto. The Anglican Church in Toronto operated Humewood, a home for unwed mothers.

⁷⁷ CBC Journalist Bette Cahill documented the tragic case of unregulated homes in her history of the Ideal Maternity Home in Chester Nova Scotia in *The Butterbox Babies*, Halifax. 2nd Edition, (Halifax: Fernwood Press, 2006), 86-89; See also: Karen Balcom *The Traffic in Babies: Cross-Border Adoption And Baby-Selling between the United States and Canada, 1930-1972* (Toronto Buffalo London: University of Toronto Press, 2011).

⁷⁸ Regina Kunzel, "White Neurosis, Black Pathology: Constructing out-of Wedlock Pregnancy in the Wartime and Postwar United States," in *Not June Cleaver: Women and Gender in Postwar America, 1945-1960*, ed., Joanne Meyerowitz (Philadelphia: Temple University Press, 1994), 304-31.

⁷⁹ Herman, "Paradoxical Rationalization," 339-385.

⁸⁰ Phillips, ""Financially irresponsible," 329-358.

While most historians agree that adoption became rationalized and professionalized in the postwar period, I argue that adoption was a particular *professionalizing project* of social workers.⁸¹ Social workers began to define their specialized knowledge and craft, arguing that only they could interpret the needs of a *particular* child and fit the child within an appropriate home and social environment.

The postwar II period stands out in both the history of adoption and the history of social work in western nations such as Canada, the U.K., United States, and Australia.⁸² Contemporary historians, like postwar social workers, attribute the changing popularity of adoption in the postwar decades to the modernization of adoption practices, and the triumph of humanism (e.g. the *nurture over nature* discourse) after WWII.⁸³ Still, most accounts of adoption modernization pay insufficient attention to the inter-professional conflicts social workers had to navigate, the complex gendered relations in social work, and the competing scientific and popular beliefs about health/heredity, environment, and national identity.

Social work histories tend to be written as meta-narratives, what Shurlee Swain calls “professional genealogies,” meant to answer the question: “where do we come from?”⁸⁴ In contrast, my focus on scientific adoption illuminates the ongoing credibility struggle that social workers were engaged in, in order to understand the directions taken

⁸¹ Adams, “Professionalization, Gender,” 268-69. I use Adams’ notion of a professionalization project.

⁸² Carp and Leon-Guerrero, “When in Doubt, Count,” 181-217; Murray, “Governing ‘Unwed Mothers,’” 253-276; Herman, *Kinship by Design*; Veronica Strong-Boag, *Finding Families, Finding Ourselves*; Sally Sales, *Adoption, Family and the Paradox of Origins: A Foucauldian History* (London, New York: Palgrave, MacMillan, 2012).

⁸³ Carp, *Family Matters*; Herman, *Kinship by Design*; Barbara Melosh, *Strangers and Kin: The American Way of Adoption* (Cambridge, MA, Harvard University Press, 2002).

⁸⁴ Shurlee Swain, “Writing Social Work History,” *Australian Social Work* 61, no. 3 (2008): 4. Swain locates a gap in adoption and social work history at the junction of colonialist and welfare history.

and the implications for those they came into contact with. Adoption as a professionalizing project of social workers in the 1940s, was advanced within a gendered system of professions (also structured by class, race, and sexuality.)⁸⁵ Two general questions dogged the profession (then as they do today): what *is* social work and what *exactly* do social workers do that is distinct from other professions and charity workers?

Social work has always had difficulty defining itself and there is no “solid definition” of social work practice.⁸⁶ Epstein suggested it now seems to be thought of as crafting “living conditions” or “attitudes” for citizens on behalf of the state, but the question is: what is this “craft” that rationalizes public expense for “deviant” and “troubled” people? Social workers have been variously described as “busybodies, bureaucrats, psychotherapists, child minders” or “society’s response to ‘problems associated with the industrialization and urbanization of the 20th century’.”⁸⁷

Social work is also understood by its “practitioners and the public as social science” or “modeled” on science, but Epstein argues what is not as well understood is the ways that social work legitimates power in democratic states. She suggests that a different kind of social work history might examine the governing ideas and changing intellectual sources of social work practice. Public support is needed to maintain the economic and civil order, and cannot simply be gained through “overt” coercive methods alone. Social work, like other professions, “collaborates with other occupations, mainly the ‘helping disciplines,’ all of which together manage the population” but social

⁸⁵ Adams, “Professionalization, Gender,” 267; Abbott, *The System of Professions*, np.

⁸⁶ Epstein, “The Culture of Social Work,” 7.

⁸⁷ Epstein, “The Culture of Social Work,” 7; Jennissen and Lundy, *One Hundred Years of Social Work*.

work does it by hiding behind an egalitarian ideal and it tries to *enable* citizens to “adopt normative standards” *voluntarily*.⁸⁸

At the same time, social workers have never been a coherent group. Not all social workers embraced the scientific imperative, and some were critical of what they saw as “Hollywood” inspired adoptions. Social work leaders tried to first “enrol” each other, other professionals, and the public to gain authority over adoption. Rather than do this in a “managerial” or “top-down” fashion, they collaborated with other professionals and tried to develop a standardized adoption protocol that could unite professionals, researchers, officials and parents together in their shared commitment to scientifically managed adoptions. In doing so, they helped to strengthen the therapeutic State rather than pose a challenge to it. The present case study of adoption provides an original example of how “social work has been instrumental in turning therapy into social policy.”⁸⁹

Biomedicalization

Science studies writers of the late twentieth and twenty-first centuries have been engaged with concerns articulated by Giorgio Agamben and Michel Foucault, through the concept of *biopolitics*. Biopolitics refers to a modern form of governance, and captures the convergence of the biological and historical “spheres of existence” in the

⁸⁸ Epstein, “The Culture of Social Work,” 8-9.

⁸⁹ Epstein, “The Culture of Social Work,” 11.

twentieth century.⁹⁰ Agamben posed the polemical question: to what extent had *bare life* begun to “coincide with the political realm” and had the two become indistinguishable?

Adele Clarke and Nikolas Rose explore these questions by focusing on the twentieth century transformation they call *biomedicalization*. The term represents a group of interconnected processes exemplified by public health and reproductive strategies, what Rose identified as *vital* politics, or the politics of “life itself.”⁹¹ The root concept of *medicalization* refers to a cultural shift, at the beginning of the century and strengthened after WWII, as social problems were increasingly defined as medical problems in need of treatment.⁹²

Medicalization practices include the emphasis on “exercising control over medical phenomenon” or bodily processes such as “diseases, illnesses, injuries, [and] bodily malfunctions.”⁹³ In contrast, *biomedicalization* refers to a broader transformation, as life sciences (e.g. biology) became more important to biomedicine.

Biomedicalization practices differ from medicalization practices because they do not simply refer to treatment and control, but “emphasize *transformations* of ...medical phenomena and of bodies” through “techno-scientific interventions,” that are geared to

⁹⁰ Giorgio Agamben, *Homo Sacer: Sovereign Power and Bare Life*. Translated by Heller-Roazen. Stanford, CA: Stanford University Press, 1998 [1995]; Michel Foucault, *The History of Sexuality. Vol I*, New York: Vintage, 140. Lorna Weir, *Pregnancy, Risk and Biopolitics: On the threshold of the living subject*, (London and New York: Routledge, 2006), 5-16. Weir clarifies the differences between the concepts of biopower and biopolitics and how they have been taken up or conflated, distinguishing between broad and narrow usages, and the health of populations versus the health of individuals.

⁹¹ Clarke et al, “Biomedicalization”; Rose, “Politics of Life,” 1-30; Nikolas Rose. *The Politics of Life Itself: Biomedicine, Power, and Subjectivity in the Twenty-first Century* (Princeton, N.J.: Princeton University Press, 2007).

⁹² Barbara Enrenreich and Deirdre English, *For Her Own Good: 150 Years of the Experts' Advice to Women* (New York: Anchor/Doubleday, 1989), 101-265.

⁹³ Clarke, “Biomedicalization,” 2.

“enhancement.”⁹⁴ In the second half of the twentieth century, science and technology together with biomedicine expanded their focus beyond “illness” to the “prevention” of future problems and the “enhancement” of health and life itself.

One of the processes associated with biomedicalization is the creation of *techno-scientific identities*.⁹⁵ These are identities that can be ascribed to people, or people themselves can aspire to, involving multiple players that include consumers, providers, officials, scientists and sponsors.⁹⁶ The idea of “upgrading the social order” through techno-scientific intervention, has roots in scientific adoption. The specific contributions of social workers are usually overlooked in discussions of biomedicalization, yet, as I will show, they helped to mediate the “molecular vision” of life described by sociologists and historians.⁹⁷ Through their work in adoption, social workers engaged in processes that led to the creation of new “bio-social identities” and new forms of “biological citizenship” and entitlements.⁹⁸

Methodology and Primary Sources

My interest in the topic of adoption is motivated by a general sociological question posed by Durkheim via science studies theorist John Law: what binds us together (if anything ever did)?⁹⁹ Law believes the question of connection is important

⁹⁴ Ibid., 36-39.

⁹⁵ Clarke, “Biomedicalization,” 26.

⁹⁶ Clarke, “Biomedicalization,” 12; Herman, *Kinship By Design*.

⁹⁷ Rose, *Politics of Life Itself*; Lily Kay, *The Molecular Vision of Life: Caltech, the Rockefeller Foundation and the Rise of the New Biology* (New York: Oxford University Press, 1993).

⁹⁸ These concepts are discussed in Clarke, “Biomedicalization,” 39.

⁹⁹ John Law, “Introduction,” in *The Sociology of Monsters: Essays on Power, Technology and Domination*, ed. John Law, (London and New York: Routledge, 1991), 1-19. This question was posed by sociologist Emile Durkheim, and taken up more recently by the science studies theorist John Law.

because it is linked to two additional questions he calls the problems of “heterogeneity” and “distribution.” How have differences and similarities between us been historically constructed and how have unequal distributions (resources, effects, treatment or outcomes) been rationalized based on what are perceived as ascribed or achieved differences?¹⁰⁰ The historical case study of adoption provides a unique opportunity to explore the question, revealing it is not easily resolved. The discourses of biology, culture (e.g. values, practices, traditions), environment, and history (e.g. shared experience) have been used in contradictory ways to explain and justify different outcomes.

When I began my Master’s research on adoption in 1994 there was very little social history of adoption in Canada, particularly for the post-war II period, and slightly more for the United States.¹⁰¹ Today the field of adoption studies is flourishing and scholars in the United States, Canada and other Western countries have begun to debate the timing of key changes, asking whether the transformations of the postwar period merely “accelerated or reinforced long-term changes [rather than]...produce them.”¹⁰²

¹⁰⁰ Law, *Sociology of Monsters*, 1-19.

¹⁰¹ In Canada for example: Aitken, “Critical Compromises,” 274-299; Garber, *Disclosure of Adoption Information*; Philip Hepworth, *Foster Care and Adoption in Canada*. Ottawa, Canadian Council on Social Development, 1980; David Kirk, *Adoptive Kinship: A Modern Institution in Need of Reform*. (Toronto: Butterworths, 1981); Lévesque, “Deviants Anonymous: Single Mother.” For the U.S. see: Regina Kunzel, “White Neurosis, Black Pathology: Constructing Out-of-Wedlock Pregnancy in the Wartime and Postwar United States,” in *Not June Cleaver: Women and Gender in Postwar America, 1945-1960*, ed., Judith Meyerowitz (Philadelphia, Temple University Press, 1994), 304-331; Judith Modell, *Kinship with Strangers: Adoption and the Interpretation of Kinship in American Culture* (Los Angeles and London: University of California Press, 1994); Marion Morton, “Fallen Women, Federated Charities, and Maternity Homes, 1913-1973,” *Social Service Review* (March 1988): 61-82; Ricki Solinger, *Wake Up Little Susie: Single Pregnancy and Race Before Roe v. Wade* (New York: Routledge, 1992).

¹⁰² Carp and Leon-Guerrero, “When in Doubt, Count,” 181-217; Karen Dubinsky, *Babies Without Borders: Adoption and Migration across the Americas* (Toronto: University of Toronto Press, 2010); Strong-Boag, *Finding Families, Finding Ourselves*; Herman, *Kinship by Design*; Melosh, *Strangers and Kin*; Balcom, *Traffic in Babies*; Sales, *Adoption, Family and the Paradox of Origins*; Swain, Shurlee.

Welfare state historians Christie and Gauvreau argue that, in the Canadian context, we need to separate the immediate “reconstruction” years, between 1943-1955, from the “expansionist” 1950s that ran to the late 1960s. They suggest that less attention has been paid to the immediate postwar years and that Canadian historians have been influenced by American trends. Descriptions of the postwar decades as part of a general “baby boom era” have conflated the Canadian experience with the dominance of themes of Americanization, modernization, consensus, conformity, anti-communism and consumerism.¹⁰³

The era of postwar leisure, consumption and modernity, assumed to bring a cultural turn toward a depoliticized, modern middle-class family, did not really arrive for many people until the end of the 1950s.¹⁰⁴ In Canada, the affluent middle-class family was an ideal that many strove toward but did not achieve.¹⁰⁵ Christie and Gauvreau propose that we treat the decade after the war as an “interregnum,” a period of both continuity and change, and make the “rhetoric of consensus” a problem to be explored. They suggest we pull-apart “aspects of tradition and modernity that were in constant negotiation and tension throughout these years,” and the topic of adoptive family formation provide a significant contribution to this effort.

“Market Forces: Defining the Adoptable Child, 1860-1940.” *Social Policy and Society* 11, no. 3 (2012): 399-414.

¹⁰³ Michael Gauvreau and Nancy Christie. *Cultures of Citizenship in Post-War Canada, 1940- 1955*. (Montreal: McGill-Queen's Press, 2003). The liberal welfare state that emerged in Canada was influenced by the British welfare system, and our self-image was, at least officially, one of a “multi-cultural” nation rather than the American “melting-pot.”

¹⁰⁴ Gauvreau and Christie, *Cultures of Citizenship*.

¹⁰⁵ Veronica Strong-Boag, “Home Dreams: Canadian Women and the Suburban Experiment,” *Canadian Historical Review* 72, no. 4 (1991): 471-504; Mary Louise Adams, *The Trouble With Normal: Postwar Youth and the Making of Heterosexuality* (Toronto: University of Toronto Press, 1997).

Alvin Finkel and Annalee Gözl support the view that there was an absence of radical policy-making during the postwar years despite historical writing that suggests widespread support for an expansionist, interventionist state.¹⁰⁶ According to historical sociologist Andrew Abbott, inter-professional conflict rather than coherence (like consensus) was a driving force during this period.¹⁰⁷ The questions he suggests we ask are: who was competing for space in the public realm; what kinds of “social and cultural coalitions” were formed; and what social and historical conditions shaped alliances and inter-professional conflicts?¹⁰⁸ To some extent, social workers leaders tried to demonstrate professional “coherence” after the war, by attempting to achieve an “adoption consensus.”¹⁰⁹ However, I draw on the contribution of science studies theorists (and concept of boundary objects) to show why it was not necessary to achieve consensus in order to promote co-operation between different, competing, and often hierarchical groups. I draw on primary and secondary sources to examine how Ontario social workers actively negotiated a public role through scientific adoption.

My specific focus is on placement practices within the Protestant Children’s Aid Societies of Ontario and voluntary, “stranger” adoptions, where a child was relinquished from one biological mother and placed with new kin relations. These “voluntary” relinquishments, mostly by unwed mothers, stand in contrast to adoption by relatives,

¹⁰⁶ Annalee Gözl, "Family Matters: The Canadian Family and the State in the Postwar Period," *Left History* 1, no.2 (1993): 9-49; Alvin Finkel, *Social Policy and Practice in Canada: A History* (Waterloo: Wilfrid Laurier Press, 2006).

¹⁰⁷ Gauvreau and Christie, *Cultures of Citizenship*, 7; Abbot, *The System of Professions*.

¹⁰⁸ Gauvreau and Christie, *Cultures of Citizenship*, 8; Abbott, *The System of Professions*.

¹⁰⁹ Gauvreau and Christie, *Cultures of Citizenship*, 7. They also describe the “historical conundrum of consensus” as a strategy.

reconfigurations through marriage, or the removal of children through the child protective services of the State.

Primary Sources

The principal primary sources used for this project included records from the Ministry of Community and Social Services from the period between 1920-1970s. Located at the Archives of Ontario, (AO) these provincial records included Ministerial correspondence, as well as records from the Ontario Association of Children's Aid Societies (OACAS). These files included state-sponsored and OACAS adoption department surveys and policy drafts, controversial cases and provincial statistics from individual Children's Aid Societies in Ontario. Because of privacy concerns and regulations regarding confidentiality and the disclosure of adoption records, adoption case files were not directly accessible, however incomplete cases were intermittently located in the records. I also reanalyzed a small number of case-files from my original Master's research.¹¹⁰

The second major source of primary records came from the Metropolitan Toronto CAS and Infant's Homes at the Metro Toronto Archives (MTA). These internal records included staff minutes, director's reports, annual reports, studies and conferences papers on adoption, including papers presented to doctors at The Hospital for Sick Children and Municipal Boards. It also included newspaper clippings, and local statistics from CAS agencies that dealt with birth parents, adoptive parents and children.

¹¹⁰ Phillips, "Financially irresponsible," 329-358.

The third and final primary source included was professional social work journals, popular magazines and newspaper articles.¹¹¹ These professional and journalistic accounts provided context as well as content. The conference proceedings, staff minutes and journal articles also contained or constituted what social historian Franca Iacovetta describes as “narrative case files.”¹¹² Narratives as oral and written accounts of cases operated as artefacts that circulated between social workers and often (re)appeared in great detail at conferences, hospital presentations and in wider organizational accounts. Narrative case-files were also used for teaching/training purposes, and appeared in professional journals, public newsletters, and municipal and provincial government records. I analyzed these narrative case-files as a particular form of public *interpretation* work—a central concept and process described in the dissertation.

Feminist social historians have drawn attention to the fact that the use of official texts and documents leads researchers to focus on the discourse and experiences of the “moral overseers” rather than the submerged voices of birth mothers and adoptive children.¹¹³ Admittedly, the voices of birthmothers, children, and adoptive mothers still remain “muted” in the current account, but as Mitchinson and Iacovetta suggest, the availability of official documents allows us to examine how authority was justified, worked out, put into practice, and temporarily stabilized (or not). By reading against the

¹¹¹ These include the *Journal of Social Work*, *Social Welfare*, *Canadian Welfare*, and the three most popular magazines at the time, *Chatelaine*, *McLean's* and *Saturday Night*.

¹¹² Franca Iacovetta and Wendy Mitchinson. "Introduction: Social History and Case Files Research," in *On the Case: Explorations in Social History* ed., Franca and Wendy Mitchinson (Toronto, Buffalo, London: University of Toronto Press, 1998), 3-21.

¹¹³ Carolyn Strange, *The Perils and Pleasures of the city: Single, wage-earning women in Toronto, 1880-1930* (PhD diss., Rutgers The State University of New Jersey, 1991).

grain we can learn something about the expectations, norms, and values held by those in these positions of institutional authority, how they attempted to gain that authority, where transformations in the process occurred, and how resistance was translated or incorporated.¹¹⁴

More recently, one adoption and social work historian argued there remains a gap in the research concerning the place of social work at the intersection of professional, colonial and adoption history. Swain suggests that the focus on regulation and the “discursive environment” tends to treat social workers as peripheral or as “intermediaries” when interactions are examined from the point of view of the receiver rather than the giver of aid.¹¹⁵ The current project takes up her suggestion to move beyond “bolstering” professional status, to examine what made social work distinct from charity work rather than collapsing them, and to examine the impact that social workers “in collaboration with those who share[d] their clients (if not always there offices) ha[d] on those who willingly or unwillingly....sought their services.”¹¹⁶ Canadian scholars Amy Rossiter and Ian MacKay argue, likewise, that the profession still has to face a number of unresolved ethical questions, about the nature of social work knowledge and practice in a democratic society, questions that, while outside the scope of the thesis, implicitly inform the work.¹¹⁷

¹¹⁴ Iacovetta and Mitchinson. "Social History," 3-21; Mona Gleason, *Normalizing the Ideal: Psychology, Schooling, and the Family in Postwar Canada* (Toronto: University of Toronto Press, 1999).

¹¹⁵ Swain, "Writing Social Work History," 193-96.

¹¹⁶ *Ibid.*, 195.

¹¹⁷ Amy Rossiter, "Unsettled Social Work: The Challenge of Levinas's Ethics," *British Journal of Social Work* 41 (2011): 980-95; Ian Mackay, "Why Tell This Parable? Some Ethical Reflections on the Dionne Quintuplets." *Journal of Canadian Studies*, Vol.29, no.4 (1994): 144-152.

Historical Sociology

The method of historical sociology I draw upon differs from social history in part because it does not try to recover missing voices from the past. Abbott and Abrams argue that sociology is not historical because it deals with events in the past; it is historical because it deals with processes over time.¹¹⁸ While classical historical sociology uses a comparative framework to focus on large-scale process and patterns (e.g. Capitalism, Bureaucracy) recent work has shifted the focus to micro-processes or social operations, for example those that brought childhood into view in new ways.¹¹⁹ The question of time and period is further complicated by the idea that “identity [is] negotiated over time” with “complexes of variables” and Abbott suggests that the challenge is to remember that “social process[es] move on many levels at once,” when trying to write any sort of narrative history.¹²⁰

Philip Abrams described one of the aims and difficulties of historical sociology as how to study the “problem of generations,” meaning the transformations that occur over time and space to create *almost* different human beings. His ideas resonate with some of the ideas of STS scholars, when they describe humanity as an *achievement* rather than a given, as something “artificial,” mutable, and to be worked on, without

¹¹⁸ Andrew Abbott, “History and Sociology: The Lost Synthesis,” in *Engaging the Past: The Uses of History across the Social Sciences*, ed., Eric. H. Monkkonen (Durham and London, Duke University Press, 1994), 77-112.

¹¹⁹ Turmel, *Historical Sociology of Childhood*, 1. Turmel makes the case for a different kind of historical sociology and draws on STS to examine the “compounded social operations such as circulation, translation, standardization, and stabilization of children, which were crucial in shaping modern childhood.”

¹²⁰ Abbott, “History and Sociology,” 101.

meaning “anything goes.”¹²¹ Adoption scholars, too, describe the “achieved” versus “ascribed” difference between adoptive (social) and biological (natural) families as socially and symbolically significant.¹²² I suggest that *all* families (like nations) are achievements, not just adoptive families; the task is to explain how and why our current social arrangements support some forms and not others.

While a number of theoretical frameworks are relevant to this project, I have chosen to combine resources from science and technology studies (STS), feminist cultural anthropology, and historical sociology.¹²³ One of the shared commitments and general theoretical preoccupations of these writers is the late 20th century interest in “problematizing the social.”¹²⁴ Feminists and critical race theorists suggest that the biological and the social spheres have always been intertwined, but urge us to pay

¹²¹ Philip Abrams, *Historical Sociology* (Ithaca, New York: Cornell University Press, 1994. [1982]); Bruno Latour, “The Impact of Science Studies on Political Philosophy,” *Science, Technology and Human Values* 16, no.1 (Winter 1991): 3-19; Law, *Sociology of Monsters*, 1-19; Rose, “Politics of Life,” 1-30; Donna Haraway, *Simians, Cyborgs. and Women: The Reinvention of Nature* (New York: Routledge, 1991).

¹²² Ellen Herman, “Rules for Realness: Child Adoption in a Therapeutic Culture,” *Society* 39 (2002): 11-18. Herman, *Kinship by Design*. David Kirk, *Shared Fate: A Theory of Adoption and Mental Health*. New York and London: The Free Press, Collier Macmillan Press, 1964.

¹²³ Evelyn Fox-Keller, “The origin, history, and politics of a subject called ‘gender and science’: a First person account,” in *Handbook of Science and Technology Studies*, ed., S. Jasanoff, G.E. Markle, J.C. Peterson and T. Pinch (Thousand Oaks, CA: Sage, 1995), 80-94. The historical sociology I draw on is largely influenced by Michel Foucault’s genealogical work, such as: Abrams. *Historical Sociology*; Abbott, “History and Sociology,” 77-112; Abbott, *The System of Professions*.

¹²⁴ Adele E. Clarke, “Qualitative Methodologies” Conference. Unpublished conference paper, WLU Brantford, ON, 2011. The ideas she presented are discussed fully in: Adele E. Clarke. “Biomedicalization: A Theoretical and Substantive Introduction.” In *Biomedicalization: Technoscience, Health, and Illness in the U.S.* ed., Adele E. Clarke, Laura Mamo, Jennifer Ruth Fosket, Jennifer R. Fishman, and Janet K. Shim, (Durham and London: Duke University Press, 2011), 1-44; William H. Sewell Jr., “Refiguring the ‘Social’ in Social Science: An Interpretivist Manifesto,” in *Logics of History: Social Theory and Social Transformation* (Chicago and London: University of Chicago Press, 2005), 81-123. See also 1-21, 318-372.

attention to the specific contexts in which it is done, the metaphors that are employed, and the distributions (or effects) that follow.¹²⁵

Drawing on conceptual tools from (STS) my dissertation explores the relative importance of processes of *translation*, *interpretation*, and *boundary-work*. These processes are analyzed as different strategies that were employed by social workers, as they co-constituted the profession and society through scientific adoption practice. In each of three substantive chapters I explore their strategies and the content of practice, to provide an alternative to accounts that simply treat science as a set of techniques and judge it by its usefulness.

The dissertation analyzes the rise of scientific adoption as an important professionalizing project of Ontario social workers during the 1940s through 1950s. Chapter one outlines the key scholarly literatures that inform this study and core concepts used in the thesis. Chapter two provides a brief history to locate the origins of scientific adoption practice. In Chapter three I describe how social workers participated in the formation of the therapeutic state, by embracing new forms of knowledge (e.g. psychology, psychoanalysis and psychiatry) and building alliances with other experts.

Chapter four interrogates the parallel “boundary work” and “interpretation work” that social workers undertook, as they sought to interpret what made their particular expertise different from that of other professionals. Finally, chapter five attends to the

¹²⁵ Emily Martin, "Anthropology and the Cultural Study of Science," *Science, Technology and Human Values* 23, no. 1(1998): 24-44; Nancy L Stepan and Sander L. Gilman, "Appropriating the Idioms of Science: The Rejection of Scientific Racism," in *The "Racial" Economy of Science: Toward a Democratic Future*, ed., Sandra Harding (Bloomington and Indianapolis: Indiana University Press, 1993), 170-193; Sarah Franklin, "Science as Culture, Cultures of Science." *Annual Review of Anthropology* 24 (1995): 163-84; Donna Haraway, "A Game of Cat's Cradle: Science Studies, Feminist Theory, Cultural Studies," *Configurations* 2, no.1 (1994): 59-71.

other side of social workers' "interpretation work" by exploring "translation" work. The work of developing an "interpretive framework" and standardized protocol involved delineating categories of "adoptability" and "unadoptability" of children, and "eligibility" of parents. I show how social workers drew on and exploited the nature versus nurture controversy, using uncertainty about "heredity versus environment" to enhance their claims to professional legitimacy.

This analysis does not try to capture the complexity of adoption and social work history in Ontario, and is not intended as a complete intellectual history of social work, CAS adoption services, or hereditary science. My objectives were two-fold: to take an under-examined area of social work history--adoption--and highlight the labour of social workers in supporting transformations of science and medicine. Until now the profession of social work has remained largely outside the view of social and cultural studies of science. I underline important trends and strategies in social work while interrogating the meanings of science in accounts that describe the modernization of adoption practice.

Chapter One Relationship to Scholarly Literatures

[A]ny new possibility that existence acquires, even the least likely, transforms everything about existence.

Milan Kundera *Slowness* (1995)

Given the many threads that unite this thesis I draw on five key literatures to analyze the social and historical conditions that gave rise to scientific adoption practice. The five comprise the social studies of science and technology, theories of professionalization, the history of social work and adoption, and feminist writing on the welfare state. The dissertation has two organizing questions: 1) how was adoption important to the story of social work professionalization, and 2) how have sociologists grappled with the question of science in social work? I begin the chapter by discussing the relevance of social and cultural studies of science (STS) for analyzing the relationship between scientific knowledge and the social practice of adoption.¹

Science has Always Been Social

In his overview of the sociology of science, Stephen Shapin describes the sociological analysis of “the mundane means that so powerfully effect the circulation of science” as the problem of travel.² In the dissertation I explore the problem of travel by focusing on circulations of science in the, largely invisible,

¹ Hereafter, I use (STS) to refer to both social and cultural studies of science and technology, by no means a universal form in the literature.

² Steven Shapin, “Here and Everywhere: Sociology of Scientific Knowledge,” *Annual Review of Sociology* 21 (1995): 307.

day-to-day practices of social workers in adoption. I draw on theoretical literature from the social studies of science and technology (STS), comprising the sociology of scientific knowledge (SSK), feminist and cultural science studies (CST),³ and selections from social worlds and arenas theory (SWAT) and actor-network theory (ANT).⁴

Writers in the social and cultural studies of science emphasize the porosity of boundaries between scientific and social worlds, shifting the focus towards an analysis of the process and outcomes of boundary-drawing activity itself. Emily Martin envisioned the image of the *citadel* to describe the way that natural science is often thought of and treated like a “fortress” apart from history and society, but she like others questions the “solidity of the citadel walls” arguing it is more accurate to call them permeable or leaky.⁵

Boundary work is understood as a practice associated with Western modernity and in the dissertation I use the term three ways. The first refers to the ongoing work which creates the “inside” and “outside” of science, such as who is granted scientific credibility (scientists versus non-scientists), who is excluded, and

³ For an overview of feminist social and cultural studies approaches see Sharon Traweek, “An Introduction to Cultural, Gender, and Social Studies of Science and Technology,” *Journal of Culture, Medicine and Psychiatry* 17 (1993): 3-25; Emma Whelan, “Politics by Other Means: Feminism and Mainstream Science Studies.” *The Canadian Journal of Sociology* 26, no. 4 (2001): 535-581.

⁴ Some examples of this work are: Adele E. Clarke, “Social Worlds/Arenas Theory as Organizational Theory,” in *Social Organization and Social Processes: Essays in Honour of Anselm L. Strauss*, ed., David Maines (Hawthorne, New York: Aldine de Gruyter, 1991), 119-58; Joan Fujimura, “Crafting Science: Standardized Packages, Boundary Objects, and ‘Translation’,” in *Science as Practice and Culture*, ed., Andrew Pickering (Chicago: University of Chicago Press, 1992), 168-211; Bruno Latour, *The Pasteurization of France*, (Cambridge, Mass.: Harvard University Press, 1988); Michel Callon, “On Interests and Their Transformation,” *Social Studies of Science* 12 (1982): 615-625; John Law, *A Sociology of Monsters: Essays on Power, Technology and Domination*. London, New York: Routledge, 1991.

⁵ Emily Martin, “Anthropology and the Cultural Study of Science: Citadels, Rhizomes and String Figures,” *Science Technology and Human Values* 23, no. 1 (1998): 24-45.

under what conditions.⁶ The second related form of boundary-work refers to what is considered to be within the boundaries of scientific intellectual activity, including what circulates as science. For example, dichotomies are usually drawn between the natural/social/cultural, social/technical, fact/fiction, subjectivity/objectivity, science/pseudo-science, and science/values, etc.⁷

The third meaning of boundary-work denotes the *outcomes, effects*, and convergence of particular kinds of boundary-drawing activity. The outcomes include (but are not limited to) classification schemes, categories, and standardization practices that have become part of what Bowker and Star call the taken-for-granted regulation and “facilitation” of daily life in the 20th and 21st centuries.⁸ Within STS classification schemes (such as IQ tests and height-weight charts) are described as “social technologies” and they resemble the “dividing practices” described by critical social work scholars influenced by Foucault.⁹

⁶ Thomas F. Gieryn, “Boundary Work and the Demarcation of Science from Non-Science: Strains and Interests in Professional Ideologies of Scientists,” *American Sociological Review* 48 (December 1983): 781-795; Ludwig Fleck, *Genesis and Development of a Scientific Fact*, Chicago: University of Chicago Press, [1935] 1979; Bruno Latour, “Technology is Society Made Durable” in *A Sociology of Monsters: Essays on Power, Technology & Domination*, ed. John Law (London & New York, Routledge, 1991), 103-131.

⁷ Gieryn, “Boundary Work,” 781-795; Emily Martin, “Cultural Study of Science,” 24-45; Fleck, *Genesis and Development*; Bruno Latour, “Technology is Society Made Durable” in: *A Sociology of Monsters: Essays on Power, Technology & Domination*, ed. John Law (London & New York, Routledge, 1991), 103-131.

⁸ Bowker and Star, *Sorting Things Out*; Susan L. Star and James R. Griesemer, “Institutional Ecology, ‘Translations’ and Boundary Objects: Amateurs and Professionals in Berkeley’s Museum of Vertebrate Zoology, 1907-39,” *Social Studies of Science* 19 (1989): 387-420.

⁹ For a discussion of dividing practices see Adrienne S. Chambon, “Foucault’s Approach: Making the Familiar Visible,” in *Reading Foucault for Social Work*, ed., Adrienne S. Chambon and Laura Epstein, (New York: Columbia University Press, 1999), 51-81; “Social technologies” are described in André Turmel, *A Historical Sociology of Childhood: Developmental Thinking, Categorization and Graphic Visualization* (Cambridge, Cambridge University Press: 2008), 115-154.

In a review entitled “Science as Culture, Cultures of Science,” Sarah Franklin described the relationship between the rise of STS and a shift from gender studies to “science studies” as a result of postmodern, postcolonial critiques within anthropology.¹⁰ Postcolonial critiques challenged the distinction between natural and social facts, moving the focus from gender, race and kinship, to “science and biogenetics.”¹¹ However, feminist commentators argue that not all STS writers have taken seriously the implications of these critiques.¹²

I draw on feminist writers who emphasize the social relations and networks in which science and technology are embedded, as well as the “possible worlds” that science and technology bring forth.¹³ Early ethnographic studies, for example, showed that it was not just *social* concepts (such as kinship, gender and race) that were constructed; nature, science, and technology were also constructed and inscribed. I try to determine *which relations to nature* were assumed and reinforced in postwar adoption practice.¹⁴

Where previously social constructionist perspectives dominated much of the work in feminist STS, now the place and function of “nature” or “matter” is being rethought in response to critiques of discourse (or social) determinism and

¹⁰ Sarah Franklin, “Science as Culture, Cultures of Science.” *Annual Review of Anthropology* no. 24 (1995): 163-84.

¹¹ Franklin, “Science as Culture,” 164.

¹² Haraway, “Modest Witness,” 428; Whelan, “Politics by Other Means,” 535-581.

¹³ Arturo Escobar, “Welcome to Cyberia: Notes on the Anthropology of Cyberculture,” *Current Anthropology* 35, no.3 (1994): 217.

¹⁴ Knorr-Cetina, “Laboratory Studies,” 150 [emphasis added]. She argues that we need to examine relations to nature, in specific locations.

relativism.¹⁵ New feminist work theorizes science as both a material and semiotic practice, and gives equal attention to discursive and material effects instead of distinguishing between “natural” facts and social factors, or “out there ness versus “products of nature.”¹⁶ Theorists like Barad analyze human and non-human actants to understand “how matter comes to matter,” and subsequently how boundaries are produced.¹⁷

Martin describes the cultural studies approach to science as material-semiotic to recognize that science is thoroughly embedded in the socio-cultural world, without discounting, rendering passive, or speaking *for* “nature.” Rather than trying to unmask “non-scientific” biases in both popular and scientific representations of phenomenon, she asks us to consider how social and cultural tropes are both “constraining and creative” features within scientific research and practice.¹⁸ The focus is on the processes which flow both in and out of science, between scientific and extra-scientific contexts, and between those who call themselves scientists and those who are not.¹⁹

Early in the century, Ludwig Fleck argued that science as a particular form of culture has *always* depended on translation relationships between scientists and non-

¹⁵ Karen Barad, "Meeting the Universe Halfway," in *Feminism, Science and the Philosophy of Science*, ed., L.H. Nelson and J. Nelson (Great Britain: Kluwer Academic Publisher, 1996), 161-94.

¹⁶ Emma Whelan, "'Well Now, Who's the Doctor Here?'" *Boundary-Work and Transgression in Patient and Expert Knowledges of Endometriosis*. (PhD diss., Carleton University, 2000), 47.

¹⁷ Barad, "Meeting the Universe." Critical disability theorists express similar concerns with some versions of social constructionism because they elide the difference of bodily experiences, even while emphasizing the inequality of conventional social arrangements and infrastructures.

¹⁸ Martin, "Cultural Study of Science."

¹⁹ *Ibid.*

scientists, calling it the interplay between different styles of thought.²⁰

Contemporary writers suggest the interactions between scientists and non-scientists can be theorized as a complex historical process of “forging ways of acting, being and thinking in the world, or in other words, forging what anthropologists call cultures.”²¹ Martin and Rapp maintain it is not only scientists who determine what is relevant, or what pertains to “scientific knowledge and practice” but also those who contribute to and make use of scientific materials. The current project examines the scientific contributions and translations of health and heredity by social workers and parents through adoption practice.

Historians of medicine and biology argue that technical knowledge alone does not explain wide-scale scientific changes; knowledge and practice are always embedded within “social organization, emotional experience, cultural expectations, and institutional structure[s].”²² For example, social and popular beliefs were important to the rise of the molecular biology and forthcoming commitments from private and public institutions to this kind of science. Our concern with the origins of disease is not new and one of the reasons the nature-nurture controversy continues to exert its appeal is because of its relationship to older narratives.²³

²⁰ Fleck, *Genesis and Development*.

²¹ Martin, “Cultural Study of Science”; Rayna Rayna, Deborah Heath, and Karen-Sue Taussig, “Genealogical Dis-Ease: Where Hereditary Abnormality, Biomedical Explanation, and Family Responsibility Meet,” in *Relative Values: Reconfiguring Kinship Studies*, edited by Sarah Franklin and Susan McKinnon (Durham and London: Duke, 2001), 384-409.

²² Susan Lindee, “Genetic Disease in the 1960s: A Structural Revolution,” *American Journal of Medical Genetics*. 115 (2002): 80.

²³ Evelyn Fox Keller, “Nature, Nurture, and the Human Genome Project,” in *The Code of Codes: Scientific and Social Issues in The Human Genome Project*, ed., Daniel J. Kevles and Leroy Hood, (Cambridge, MA & London: Harvard University Press 1992), 281-299.

Fox Keller maintains, the molecular vision of life that emerged in the postwar period was not simply a continuation of earlier genetic determinism, it signified the “transfiguration” of genetics.²⁴ Until now, the labour of social workers as “non-scientists,” and their translations of the nature-nurture controversy in the field of adoption have been outside the view of most social studies of science. Canadian adoption historian Karen Balcom asks whether postwar adoption social workers were responding to broader cultural changes or leading them. I draw on STS to suggest the answer is both: through the process of constructing their own professional identities social workers responded to broader cultural changes *and* contributed to them.²⁵

Significance of Adoption to Science Studies

Actor-network theorist Bruno Latour defines science as a fresh source of power, suggesting “science is politics pursued by other means” because it is able to “escape the scrutiny of stated political programs.”²⁶ He believes sociologists have to go beyond trying to “unmask” the hidden ideological, or political interests beneath science to instead consider the co-constitution of science and society. Rather than thinking of technology as something that we either master or it will master us, and treating technology as instrumental or a “means to an end,” we should consider how “our *ends change* along with our means;”²⁷

Morality is no more human than technology...it traverses the world and, like technology...it engenders in its wake forms of

²⁴ Fox Keller, “Nature, Nurture,” 281-289; Lily Kay, *The Molecular Vision of Life: Caltech, the Rockefeller Foundation and the Rise of the New Biology* (New York: Oxford University Press, 1993).

²⁵ Karen Balcom, “Constructing Families, Creating Mothers: Gender, Family, State and Nation in the History of Child Adoption,” *Journal of Women's History* 18 (1) (2004): 219-232.

humanity, choices of subjectivity, modes of objectification, various types of attachment.²⁸

Critical and feminist STS theorists go further arguing we can still reflect on directions taken in science. Just because we cannot “know” for certain does not mean we cannot say anything at all.²⁹ They suggest we take a look at the commitments we make when we invest in particular techno-scientific *means* (such as the Human Genome Project and bio-informatics technology), because the choices made now open up some paths of action and foreclose others.³⁰ It has become much more difficult for marginal groups, without the same resources, to compete with and/or challenge existing infrastructures and dominant science paradigms, or to participate in policy arenas. I ask whether, by reaching back to the history of scientific adoption we can find a comparative lens from which to examine commitments to science in the present. How have the interests of children

²⁶ Bruno Latour, “Give Me a Laboratory and I Will Raise the World,” in *The Science Studies Reader*, ed. Mario Biagioli (New York & London: Routledge [1983, abridged 1998]), 273. Robert Castel makes a similar argument about the rise of psychiatry in the 20th century.

²⁷ Bruno Latour, “Morality and Technology: The End of the Means,” *Theory, Culture & Society* 19, no. 5/6 (2002): 247-260.

²⁸ Latour, “Morality and Technology,” 254.

²⁹ Rosalind Gill and Keith Grint, “Introduction: The Gender-Technology Relation: Contemporary Theory and Research,” in *The Gender-Technology Relation: Contemporary Theory and Research*, ed., Keith Grint and Rosalind Gill (London: Taylor & Francis, 1995), 1-28; Rosalind Gill, “Power, Social Transformation, and the New Determinism: A Comment on Grint and Woolgar,” *Science, Technology and Human Values* 21, no.3 (1996): 347-353; Donna Haraway, “A Game of Cat’s Cradle: Science Studies, Feminist Theory, Cultural Studies,” *Configurations*. 2 (1) (1994): 59-71; Langdon Winner, “On Opening the Black Box and Finding it Empty: Social Constructivism and the Philosophy of Technology,” *Science, Technology, & Human Values* 18, no.3 (1993): 362-378.

³⁰ Abby Lippman, “Led (Astray) by Genetic Maps: The Cartography of the Human Genome and Health Care.” *Social Science Medicine* 35, no.12 (1992): 1469-1476; Joan Fujimura, “The Practices of Producing Meaning in Bioinformatics,” *Sociology of Science Yearbook* 19 (1999): 49-87; Laurie Ann Whitt, “Biocolonialism and the Commodification of Knowledge,” *Science as Culture* 7, no.1 (1998): 33-67. Some of the diverse social implications that are described (and conceptualized) by these writers include Lippman on “the geneticization of society,” Fujimura on the growth of “bio-informatics” regulation, and Whitt on the possible “biocolonialism” associated with the patenting of genetic information and the marketing of indigenous knowledge of plants.

(grandchildren or future generations) been used to justify investments in particular scientific interventions, with unequal outcomes?

Cultural anthropologist Marilyn Strathern has argued that one of the foundational assumptions about knowledge is “that one should act on what one knows.”³¹ Her concern with the effects of knowledge, especially new medical knowledge, is with how it displaces other knowledge in an “irreversible process” where no return to old assumptions is possible. It is not merely about adding new procedures, or adding to a body of knowledge about what we already know. It is about “closing off” avenues in a “substitutive effect” because new knowledge “works on the old” radically replacing old assumptions, so that “new facts about biogenetics [propose to] tell us what kinship was all along.”³²

Consider the bullish remarks of one of the geneticists who was part of the Human Genome Project, who claimed *he* could have told Alex Haley (author of *Roots*) who he “really was” saving him a whole lot of trouble.³³ Sociologists studying genetic researchers, tracing disease genealogies in “remote” communities, have had to critically reflect on the social implications and potential violence of their own involvement in knowledge production (e.g. interviewing subjects). It became clear that relatives who may have genetic markers are obligated or exhorted to act on

³¹ Marilyn Strathern, "Displacing Knowledge: Technology and the Consequences of Kinship," in *Conceiving the New World Order*, ed. Rayna Rapp and Faye D. Ginsberg (Berkeley, Los Angeles, & London: University of California Press, 1995), 360.

³² Strathern, "Displacing Knowledge," 347-348.

³³ Jonathon Marks, "We're Going to Tell These People Who They Really Are": Science and Relatedness," in *Relative Values: Reconfiguring Kinship Studies*, ed., Sarah Franklin and Susan McKinnon (Durham and London: Duke University Press, 2001), 355-383; Deborah Lynn Steinberg, "Reading genes/writing nation: Reith, 'race' and the writings of geneticist Steve Jones," in *Hybridity and Its Discontents: Politics, Science, Culture*, ed., Avtar Brah and Annie E. Coombes (London and New York: Routledge University Press, 2000), 137-53.

what they know for future generations, but they also had to explain to sociologists why they “refused” to know or get tested.³⁴ Contemporary adoption scholars have described the similar resurgence of bio-determinism in adoption practice.

Joan Fujimura argues that the new “informatics” allows for a form of domination in the production of the “Genetically Normal,” making the relationship between knowledge and practice explicit. Her use of the concept of standardization has parallels with Foucault’s “normalization” practices because in both cases new kinds of bodies and subjects are a consequence.³⁵ Popular understandings of women as “carriers” of the newly located breast cancer gene are part of the new informatics strategies she describes: “[T]his language symbolizes both a conception of these women as genetically pathological and a commitment to particular paths of action.”³⁶

I show how postwar social workers participated in similar informatics strategies and courses of action by circulating and translating scientific knowledge in adoption. In the 1950s, they described children as “unadoptable” because they had a pre-disposition to cancer, Huntington’s disease, or epilepsy. In so doing, they strengthened the links between the state, science and the formation of families,

³⁴ Michel Callon and Vololona Rabeharisoa, "Gino's lesson on humanity: genetics, mutual entanglements and the sociologist's role," *Economy and Society* 33, no.1 (2004): 1-27.

³⁵ Joan Fujimura, “The Practices of Producing Meaning in Bioinformatics,” *Sociology of Science Yearbook* 19 (1999): 79.

³⁶ Fujimura, “Practices of Producing Meaning,” 80. The example of chemo-prevention, as one of these actions, is described by Jennifer Ruth Fosket, “Breast Cancer Risk as Disease: Biomedicalizing Risk,” in *Biomedicalization: Technoscience, Health, and Illness in the U.S.* ed. Adele E. Clarke, Laura Mamo, Jennifer Ruth Fosket, Jennifer R. Fishman, and Janet K. Shim (Durham and London: Duke University Press, 2011), 331-335.

reflecting a broader cultural shift, described by Clarke, in which medicine became a “cultural good.”³⁷

Paul Rabinow was one of the first to use the concept of “bio-sociality” to describe the formation of new solidarities based on disease identities, a process identified with *biomedicalization*.³⁸ Scholars have since documented growing resistance by those who “refuse to know” genetic “knowledge” because it may result in a reduction of identity.³⁹ One of the social implications is that if subjectivity is formed by hooking-up to certain bodies of practice (eg such as social work, scientific, or genetic research), then choosing not to “hook up” poses a challenge to certain forms of subjectivity, humanity, and morality.⁴⁰ What these writers share is a conviction that language in science is “not about description, but about commitment” and the futures we want to build.⁴¹ Adoption was an important professionalizing project for a segment of social workers. Social workers invested in a model of professionalization (associated with medicine) that made commitments to science in the advancement of scientific adoption. In so doing, they contributed to a

³⁷ Adele E. Clarke, “From the Rise of Medicine to Biomedicalization,” in *Biomedicalization: Technoscience, Health, and Illness in the U.S.* ed., Adele E. Clarke, Laura Mamo, Jennifer Ruth Fosket, Jennifer R. Fishman, and Janet K. Shim (Durham and London: Duke University Press, 2011), 106; Herman, *Kinship by Design*.

³⁸ Paul Rabinow, “Artificiality and Enlightenment: From Sociobiology to Biosociality,” in *Essays on the Anthropology of Reason*, ed. Paul Rabinow (New Jersey: Princeton University Press, 1996), 91-111; Adele Clarke, “Biomedicalization: A Theoretical and Substantive Introduction,” in *Biomedicalization: Technoscience, Health, and Illness in the U.S.* ed., Adele E. Clarke, Laura Mamo, Jennifer Ruth Fosket, Jennifer R. Fishman, and Janet K. Shim (Durham and London: Duke University Press, 2011), 1-44.

³⁹ Paul Rabinow, “Dalton's Regret and DNA Typing” *Culture, Medicine, and Psychiatry* 17, no.1 (1993): 59-65; Callon and Rabeharisoa, “Gino's lesson on humanity,” 1-27. Callon and Rabeharisoa described one man’s (Gino) strategy of playing “ignorant,” as an attempt to assert a form of agency. Gino refuses to get tested despite the onslaught of medical, moral and family pressure about his obligations to his grandchildren and a brother with the condition (muscular dystrophy).

⁴⁰ Callon, “Gino's lesson on humanity,” 1-27.

⁴¹ Fujimura, “The Practices of Producing Meaning,” 80.

vision of the “perfectibility of humans” and the genetically and psychologically normal child.

My case study of postwar adoption provides a lens from which to view how scientific knowledge has had a “substitutive effect” on social relationships in the present. In the late twentieth-century, two new phenomena emerged: *wrongful adoptions* and *adoption medicine*. “Wrongful adoption” cases appeared in the 1990s with a disquieting effect on social work practices in the United States.⁴² Madelyn DeWoody described precedent-setting legal cases in the United States in which claims were made against adoption agencies by adoptive parents who were “unsuspectingly” given “socially and biologically defective” children. A discussion emerged within the socio-legal context about the need to develop precautionary risk measures targeting future adoptions, but these measures also worked in reverse. Investigators re-opened and scrutinized previous adoption records, essentially looking for “bio-social” risks.

In some States, new regulations were legislated with language outlining social workers’ “obligations to report” the “faulty” histories (eg. social, family, genetic) of children and family members, found in previously closed files, in order to reduce the likelihood of future liability claims. Social workers were (and are) supposed to review information given to them in earlier decades, going back to the 1950s, in light of new findings in science. They are required to inform families and

⁴² Madelyn DeWoody, "Adoption and Disclosure of Medical and Social History: A Review of the Law," *Child Welfare* 72, no. 2 (1993): 195-217.

(now adult) children about the potentially dangerous genetic information that is part of their “biological” history, reasserting the bias of “blood,” while at the same time assessing other therapeutic risks associated with their social and psychological (or environmental) history. These policy changes provide further support to the view of social work scholars, who contend that social workers have been (and remain) engaged in a “perennial” scientific and professional credibility struggle.⁴³

Another phenomenon that appeared in the 1990s was the new field of adoption medicine. As more parents began to choose the transnational and private adoption route, private agencies, composed of physicians and other experts, claimed they could predict the developmental risks associated with children available for transnational adoption, by viewing videotapes of children who had lived their short lives in institutions.⁴⁴ There have since been a number of high profile, tragic cases of young children being sent back to their countries of origin or re-placed in institutions when adoptions “failed.”⁴⁵

One popular representation that captured the anxieties associated with international adoption was John Sayles’ (2003) film, *Casa de Los Babys*. Set in an unknown Latin American country, it tackled some of the complex global politics and corruption linked to international adoption. In one scene a wealthy American

⁴³ Laura Epstein, “The Culture of Social Work,” in *Reading Foucault for Social Work*, ed. Adrienne S. Chambon and Laura Epstein (New York: Columbia University Press, 1999), 12.

⁴⁴ “The Orphan Ranger: Adopting A Damaged Child,” *New Yorker Magazine* (July 17, 2000): 38-45. A medical expert, Dr. Jane Aronson, is quoted as saying: “This isn’t a shopping mart, you know.” Her practice in New York involved measuring, observing and predicting adoption success, but also helping adoptive parents to find resources after adoption, given the “limits” of science.

⁴⁵ In one recent, sensational case a young child adopted in the United States (Tennessee) was sent back to Russia alone, on a plane with a nametag around his neck.

woman, frustrated by the delays intentionally manufactured by the private adoption agency, offers to pay cash “under the table” to the lawyer brokering the arrangements. She draws on the dominant (Western) paradigm of developmental science to justify her actions exclaiming: “these are important developmental months...I don’t want to have to undo the damage that has already been done.”

Adoption exposes one of the paradoxes of liberalism in western liberal democratic states. As Herman explains, “Americans” (and Canadians) prize individual achievement, freedom and choice, yet the blood bias still exists. Blood is the standard measure of relatedness and in most cases it trumps scientific and political definitions of connectedness when it comes to expected social obligations--even as we celebrate our chosen families. The American dream is filled with the myths of progress, meritocracy, democracy, immigration, and migration, and though there are degrees of difference in Canada, the same general themes apply. The national narrative, says Herman, pits “democracy against aristocracy” in a story in which willing participants build a new nation in a “metaphorical adoption narrative.”⁴⁶ Yet, when kin relations are not given by “blood,” individuals’ origins are scrutinized more closely, and sometimes relationships have to be justified and translated into biological equivalencies. In the case of adoption, differences between biological and non-biological kin, especially adopted children who engage in inappropriate social behavior, are usually chalked up to inborn “nature.” For

⁴⁶ Ellen Herman, *Kinship by Design*, 8.

example, consider two common axioms: “the apple doesn’t fall far from the tree;” and “what’s bred in the bone comes out in the marrow.”⁴⁷

Nature as blood (and now genes) is supposedly based on fixed, unchosen, identities that are beyond social arrangements, but, according to Herman, adoption exposes an *authenticity crisis*. Behind the celebration of voluntary belonging there are questions about whether one is “made” or “born a citizen,” a tension between “ascription” or “achievement,” showing why “family making” and “nation making” are “parallel processes.”⁴⁸ Viewing adoption history through the lens of science studies underscores the fact that kin relationships are never simply, clearly, ascribed by blood, biology, nature or science, once and for all; they are always translated in wider contexts. To paraphrase Marilyn Strathern: “relatives are always a surprise.”⁴⁹

Boundary Work between the Natural and Social

Early boundary work between the natural and social sciences created distinctions between those who studied non-human objects and those who focused on interpretative subjects, what Latour called “[the] soft *social* periphery rather than the hard, *natural* center.”⁵⁰ He maintains that the science of texts and natural science both deal with traces; the historian deals with archives and clues, while scientists interpret instruments, fossils, faint parchment and [election] polls.⁵¹ Actor-network

⁴⁷ The second axiom appears in an adoption memoir by Jeanette Winterson, *Why Be Happy When You Could Be Normal?* (Canada: Vintage, 2012), 83.

⁴⁸ Herman, *Kinship by Design*, 9; Patti Phillips, ““Blood Not Thicker Than Water”: Adoption and Nation-Building in the Post-War Baby Boom.” (master’s thesis, Queen’s University 1995).

⁴⁹ Marilyn Strathern, *Kinship, Law and the Unexpected: Relatives are Always a Surprise* (Cambridge: Cambridge University Press, 2005).

⁵⁰ Bruno Latour, “The Impact of Science Studies on Political Philosophy.” *Science, Technology and Human Values* 16, no. 1 (1991): 9-10. [my emphasis]

⁵¹ Latour, “Impact of Science Studies,” 9-10.

theorists suggest sociologists abandon a priori divisions such as the “natural” and “social” because they are outcomes rather than givens. Rather than speaking of the social order they refer to the *socio-technical order* as one, what Law calls “relational materiality.”⁵²

Ian Hacking insists that the uniqueness of the lab sciences is in their interference with nature.⁵³ The lab sciences are differentiated by their contributions, which stay with us in the form of “permanent knowledge, devices, and practices.”⁵⁴ These lead to a certain amount of stability in the taken-for-grantedness of science once in place. The lab sciences produce a “self-vindicating structure” that keeps them stable, not simply with “social constructs,” but with a “down-to earth materialism.”⁵⁵ Knorr-Cetina suggests we can use the *lab* as a theoretical concept to describe a more general process (*laboratorization*) that can be extended to other contexts, involving both the configuration of subjects and objects in an attempt to “upgrad[e] the social order.”⁵⁶

A similar process of configuration is described by Donna Haraway and Susan Leigh Star, who argue that many science studies scholars still treat gender and

⁵² John Law, "After ANT: Complexity, Naming and Topology." In *Actor Network Theory and after*, ed., John Law and John Hassard (Oxford: Blackwell Publishers, 1999), 3-4; Michel Callon, "Some Elements of a Sociology of Translation: Domestication of the Scallops and the Fisherman of St. Briene Bay," in *Power, Action & Belief: A New Sociology of Knowledge*, ed. John Law (London: Routledge, 1986), 226.

⁵³ Ian Hacking, *Representing and Intervening* (Cambridge, UK: Cambridge University Press, 1983).

⁵⁴ Ian Hacking, "The Self-Vindication of the Laboratory Sciences," in *Science as Practice and Culture*, ed. Andrew Pickering (Chicago: University of Chicago Press, 1992), 29.

⁵⁵ Hacking, "Self Vindication," 30.

⁵⁶ Karin Knorr-Cetina, "Laboratory Studies: The Cultural Approach to the Study of Science," in *Handbook of Science and Technology Studies*, ed. Sheila Jasanoff, G.E. Markle, J.C. Peterson and Trevor Pinch (Thousand Oaks, CA: Sage, 1995), 147-150. ANT theorists describe “actants” rather than agents, to include humans and non-humans as part of socio-technical chains or networks.

race as pre-formed, pre-constituted categories despite “heated debates” in all fields about how all entities are constituted in the “action of knowledge production, not before the action starts.”⁵⁷ Feminist and cultural studies approaches in STS emphasize the way the making of particular racialized and gendered subjects, such as the neutral scientist, or unmarked “modest witness,” are bound up in the making of science and who is certified to know.⁵⁸

Haraway reads primatology texts as “science fiction, where possible worlds are constantly reinvented in the contest for very real, present worlds.”⁵⁹ This conception of science does not try to remove social imagery through methodological tenets. She argues that we have to work hard to avoid the various forms of “disinterested objectivity,” which goes for scientists who claim to be discovering something through objective standards, as well as critics [and sociologists] who believe they can stand “outside” and castigate the values in science, speaking only of bias, and demanding impartiality. The alternative goal of “concrete objectivity” means understanding that both the natural and human sciences are bound up “*within* the processes that give them birth”; the question we need to ask is what is at stake in

⁵⁷ Donna Haraway, “Modest Witness: Feminist Diffractions in Science Studies,” in *The Disunity of Science: Boundaries, Contexts, and Power*, ed. Peter Galison and David J. Stump (Stanford: Stanford University Press, 1996), 433.

⁵⁸ Haraway, “Modest Witness,” 435; Sharon Traweek, “An Introduction to Cultural, Gender, and Social Studies of Science and Technology.” *Journal of Culture, Medicine and Psychiatry* 17 (1993): 3-25.

⁵⁹ Donna Haraway, *Primate Visions: Gender, Race and Nature in the World of Modern Science* (New York & London: Routledge, 1989), 5.

the authority of accounts?⁶⁰ Haraway invokes Leigh Star's idea that "power is about whose metaphor brings worlds together, and holds them there."⁶¹

At the same time, as Susan Ormrod reminds us, not everyone can mobilize constructions of society while resources are not equally distributed, and when one version "wins out," it "undercut[s] the alternatives, to make them less 'sayable'."⁶² Enduring networks makes some meanings and practices "less likely than others" and how we position ourselves (or are positioned) within any discourse or network is important, "some will be more unusual or difficult, or readily allowed than others."⁶³ She believes the boundaries of the social and technical are negotiated in the same way as gender boundaries, and argues, like Fleck, that ideas like traditional or normal are enrolled in a *modification* process, not simply through repetition. The durability of a new technology is more successful if it fits together with previous understandings of a subject's position.

During the postwar period, social worker leaders tried to enrol social workers and members of other professions in an adoption network, and position themselves as coordinators at the center of the network. Social workers drew on a metaphor of themselves as the nation's gardeners, specifically qualified to place children with "fragile roots" in healthier environments. They did this by drawing on new forms of scientific knowledge and techniques while modifying traditional ideas about science

⁶⁰ Haraway, *Primate Visions*, 5.

⁶¹ Haraway, "Modest Witness," 441; See also: Donna Haraway, "A Game of Cat's Cradle: Science Studies, Feminist Theory, Cultural Studies." *Configurations* 2, no.1 (1994): 59-71.

⁶² Ormrod, *Feminist Sociology*: 40.

⁶³ *Ibid.*, 40-45.

and gender, to create a scientific niche for women in the largely female-dominated profession.

The Sociology of Translation: Boundary Objects and Standardized Packages

Actor-network-theorists (ANT) describe the translation efforts of scientists/actors—as managers—who seek to “black-box” or stabilize facts, by forming alliances outside of science. Practitioners agree that scientific activity always involves researchers “outside” the lab because they must “formulate hypothesis concerning the identity and goals of the people with whom they interact.”⁶⁴ ANT is critical of attempts to “unmask” ideological (social) values behind or beneath scientific activity, which taint research.⁶⁵ The difference is that the interests of actors are not presumed to exist, fully intact, beforehand but are transformed through processes of alliance and translation. One of the most powerful means of engaging others’ interests is through the production of scientific knowledge. Scientists supply reasons why people should be interested in their reformulation of the world rather than relying on ready-made interests in the social world. Latour provided the example of Pasteur, whose strategy was tied to commercial, colonial and medical interests, which had to pass through him to further their own aims.⁶⁶

Andre Turmel extended ANT and the concept of translation to the historical sociology of childhood, and examined the relationships between “social actors and

⁶⁴ Callon, “Some Elements,” 204-206.

⁶⁵ David Bloor, *Knowledge and Social Imagery* (Chicago & London: University of Chicago Press, 1991), 83.

⁶⁶ Latour, “Give Me a Laboratory,” 269.

technologies” in the science of childhood.⁶⁷ By the 19th century, the developmental paradigm had become the usual way of thinking about childhood.⁶⁸ The paradigm provided “coherence and stability” to a “childhood collective,” practitioners who went about their work in learning, research, and institutional practices, providing resources to “stabilize a common world.”⁶⁹ New methods of observation and recording were put in place that relied on the social and technical processes of “measurement” and “classification;” recording could not occur without “the [technical] practice of measurement,” and it could only be done “according to explicit delineated [social] parameters.”⁷⁰

For ANT writers, the power of science and technology comes from the way that human and non-human “actants” are linked together. Technical devices work as non-human *mediators* and *translators* operating in a network of relationships with humans. Graphs, charts and other inscriptions circulate between parents, children, and experts, and “by adding new resources to the collective” they “play a decisive role in the stabilization of a common world, thus raising the stakes.”⁷¹

Turmel defines *translation* as all “the materials, which produc[e] the practices ordering and patterning social life,” and *mediation* as “the operation[s] that further the circulation between humans and non-humans.” Technological devices are extensions of human action that are usually treated as “efficient and co-ordinated,”

⁶⁷ Turmel, *Historical Sociology*, 10.

⁶⁸ Donna Varga, “LOOK -- NORMAL: The Colonized Child of Developmental Science,” *History of Psychology* 14, no. 2 (2011):137-139.

⁶⁹ Turmel, *Historical Sociology*, 11.

⁷⁰ *Ibid.*, 13.

⁷¹ *Ibid.*, 10.

and describing them as mediators means saying that “something happen[s]” along the way because the act of mediation “transforms the collective’s relationship in startling ways in the process of stabilizing it.”⁷² Charts and graphs (just as census data and case-records) “ma[d]e new connections” possible and opened up “new possibilities to the collective.”⁷³

Whereas ANT theorists focus on the translation efforts of actors-as-managers to stabilize facts in “black-boxes,” social worlds theorists (SWAT) argue that scientists are not the only ones engaged in this activity. They argue it is a two-way process of negotiation and extend the perspective to include co-operation between social worlds, not engineered by one group. Star and Griesemer introduced the concept of *boundary objects* (such as genes, concepts, classifications, IQ scores) to refer to objects that can inhabit many different social worlds and last over time.⁷⁴ Boundary objects promote translation efforts across collective work in different social worlds. Non-human boundary objects embody both standardization and mutability, helping to manage the tension between different points of view and the need for generalization, allowing for cooperation without consensus in “multi-vocal” settings.⁷⁵

⁷² Turmel, *Historical Sociology*, 10.

⁷³ Ibid., 10-11. Feminists describe the social implications of ultra-sound technology and the images produced, which transformed a pregnant woman’s relationship to the fetus in complex ways. Some people treat images as early family photos, posted on fridges, but they have also had a chilling effect, used by anti-choice activists to regulate women.

⁷⁴ Star and Griesemer, "Institutional Ecology, 'Translations' and Boundary Objects," 387-420.

⁷⁵ Adele Clarke and Joan Fujimura, "Introduction," in *The Right Tools for the Job: At Work in the Twentieth Century Life Sciences*, ed. Adele Clarke & Joan Fujimura (Princeton, New Jersey: Princeton University Press, 1992), 12-13.

Fujimura broadens the concept of boundary objects with her own model of *standardized theory method packages*, which can achieve stabilization across divergent worlds as well as flexibility. Theory-methods packages are conceived of as “grey boxes” with several different boundary objects inside (such as charts, cell cultures, or concepts that circulate etc.) combined with techniques that narrow the range of possible actions and practices people can engage in, without completely determining them.⁷⁶ Both practical and material elements help to establish “production relations between social worlds.”⁷⁷ Standardized theory-methods packages (e.g. social case-work techniques) can be used in very different contexts, by different actors, in historically situated settings that are at once “cooperative,” “conflictual” or “indifferent.”⁷⁸

Bowker and Star treat classifications as a type of boundary object that allows “cooperation across social worlds.”⁷⁹ Classification systems are integral to any working infrastructure, from small to large, local to global, and from industry to education to the welfare state. Between the 1940s and early 50s, Ontario social workers tried to develop a standardized adoption protocol that could establish workable relations between professions, officials, and the public, and they constructed a complex system of classification to determine a child’s adoptability. Classification is part of the work of developing standards. If we want to build

⁷⁶ Joan Fujimura, “Crafting Science: Standardized Packages, Boundary Objects, and ‘Translation’” in *Science as Practice and Culture*, ed. Andrew Pickering (Chicago: University of Chicago Press, 1992), 169.

⁷⁷ Andrew Pickering, “Introduction,” in *Science as Practice and Culture*, ed. Andrew Pickering (Chicago: University of Chicago Press, 1992), 13.

⁷⁸ Fujimura, “Producing Meaning,” 75.

⁷⁹ Bowker and Star, “Sorting Things Out,” 15.

anything, or have things work together in different settings, the regulation of standards is key to economic life and knowledge production.⁸⁰ The activities of classification and standardization contribute to our understanding of stability and they are “silently embodied” in the “built environment and notions of good practice.”⁸¹

Bowker and Star use the example of the International Classification of Diseases (ICD), which has been revised every 10 years since 1890, to argue it does not represent the gradual unfolding of consensus by scientists. Instead, it is a tangled web of schemes with two major (social) influences on the classification of diseases and deaths: insurance companies and religion. The concepts of *convergence* and *infrastructure* refer to how the work lives of individuals have become “closely tied up with the state... [and] occupational health concerns.”⁸² They show there can be moral conflicts when a single category has to be chosen by users or practitioners (for example: whether to report suicide on a death certificate.)

Practical activities are narrowed and shaped by the range of possible categories confronting users, and the choice of how the “facts” will be recorded is always interpreted through social institutional conventions (such as religion, insurance, education, medicine). From a social worlds perspective, classification is a “pragmatic issue” and people do what is “doable” not always ideal, shown in practitioners’ over-use of some categories and displays of regional

⁸⁰ Latour’s arguments in Bowker and Star, “Sorting Things Out.”

⁸¹ Bowker and Star, “Sorting Things Out,” 19-20.

⁸² *Ibid.*, 21.

differences.⁸³ Convergence occurs because of a need for efficacy and the pragmatic demands of daily work life where there is often a lack of funding, personnel and resources. The recognition of these pragmatic demands poses challenges to some understandings of science, and how science works. Social workers, for example, were accused of being (unscientific) “fortune-tellers” in the 1960s because of wide variations in definitions of “adoptability” between agencies, revealing the contradictions and difficulties of standardization. More children were classified as “unadoptable,” and became wards (and the financial responsibility) of the state.

As Bowker and Star point out, a data collection system tends to be put in place where there are ethical conflicts, but it does not resolve them. The development of classification systems conceals the kinds of work and politics that standardizing does, as it normalizes and naturalizes rather than describes the “natural essence” of things and people.⁸⁴ Every standard and category valorizes one point of view over another and, while not necessarily bad, the need for “practicality” makes it dangerous because it causes suffering for some and not others.⁸⁵ To paraphrase Law and Leigh Star: some of us end up looking like “monsters” and some of us don’t.⁸⁶ The conditions of production of standardization and classification work need to be considered, because there is a great deal at stake “epistemologically,

⁸³ Ibid., 21-25.

⁸⁴ Bowker and Star, “Sorting Things Out,” 21-25.

⁸⁵ Susan Leigh Star, “Power, Technology and the Phenomenology of Conventions: On Being Allergic to Onions,” in *The Sociology of Monsters: Power, Technology & Domination*, ed. John Law (London & New York: Routledge, 1991) 37-40.

⁸⁶ Bowker and Star, “Sorting Things Out,” 5; Star, “Power, Technology,” 51-52; Law, “Sociology of Monsters,” 71.

politically, and ethically” in building and maintaining standards.⁸⁷ All of us are “implicated actors,” whether we are the intended targets of knowledge or not; we are affected by it because even those who try to “escape or subvert standardization” must still live in relation to it.⁸⁸

Boundary-Drawing Work: Demarcating Scientists from Non-Scientists

One of the assumptions shared by sociologists and science studies writers is that “science carries its own intellectual authority.”⁸⁹ Thomas Gieryn provides a history of how it acquired that authority. He describes it as a long-standing problematic in philosophy and sociology: how to distinguish the characteristics of science from non-scientific intellectual activity. He defines the problem as both an analytic and a pragmatic one because it is a struggle for credibility and the rewards it brings. He argues that scientists engage in the rhetorical strategy of *boundary-work*, and use “images of science” to compete with other groups to “promote their [scientific] authority over [other] designated domains of knowledge.”⁹⁰ I describe how social workers used the strategy of boundary-work to compete with other professional and lay groups, but also suggest it was a necessary prerequisite to forming alliances with them.

Although today it is a widely accepted that science occupies its own intellectual “niche,” this was not always the case; it required (and requires) a

⁸⁷ Bowker and Star “Sorting Things Out,” 10.

⁸⁸ Star, “Power, Technology,” 26-37.

⁸⁹ Thomas F. Gieryn. *Cultural Boundaries of Science: Credibility on the Line*. Chicago & London: University of Chicago Press, 1999; Gieryn, “Boundary Work,” 781-783.

⁹⁰ Gieryn, “Boundary Work,” 781-783.

continuous process of “boundary-work” to maintain its professional and institutional authority.⁹¹ We do not have to look too far back to see how eugenics went from having widespread scientific support to being recast as pseudo-science in the 20th century, and a new boundary was drawn between it and “genetic” science.⁹²

Gieryn draws on the popular and public writings of John Tyndall in Victorian England to show how the process works. Tyndall held the position of Superintendent at the Royal Institution of London and had the task of interpreting “the progress of scientific knowledge” to “lay and scientific audiences.”⁹³ The need for public support and public funding still had to be justified at the time and Tyndall faced “two impediments: the intellectual authority of Victorian religion and the practical authority of Victorian engineering and mechanics,” who had recently begun to professionalize.⁹⁴ Tyndall used the rhetorical style called “boundary-work,” a strategy that involved using different *repertoires* (or selected characteristics) to demarcate science from two “contrast cases”: religion and mechanics.

In order to distinguish *science from religion* Tyndall constructed an ideology of science with four features: (1) “science [was] practically useful” and improved the material conditions of the nation, whereas religion was “emotionally” useful; (2) science was empirical and based on observable facts versus religion, which was metaphysical and based on unseen forces; (3) “science [was] skeptical because it

⁹¹ Gieryn, “Boundary Work,” 783.

⁹² Dianne Paul, *The Politics of Heredity: Essays on Eugenics, Biomedicine, and the Nature-Nurture Debate* (Albany: SUNY Press 1998).

⁹³ Gieryn, “Boundary Work,” 784.

⁹⁴ *Ibid.*

respects no authority other than the facts of nature," whereas religion was dogmatic and did not question old ideas; and, (4) "science [was] objective knowledge free from emotions, private interests, bias or prejudice; religion [was] subjective and emotional."⁹⁵ According to Tyndall, the book of Genesis was more like poetry.

But in order to distinguish *science from mechanics* and engineering, Tyndall used different characteristics that were inconsistent with and contradicted the former features. He downgraded science's "practical utility," and emphasized five meta-theoretical and experimental features: (1) science as knowledge was the foundation of engineering, and natural laws (in science) had to be discovered before they could be used by engineers; scientists were not inspired by utility unlike the practical man; (2) science gained knowledge through experiments with nature not merely through observation, unlike engineers who could not explain their successes or failure; science searches for the causes not simply the conditions of knowledge; (3) science looked for "unseen" principles not just the facts; (4) scientists were not driven by profit or practical regard and sought facts for themselves, unlike engineers who were interested in industrial gains; and finally, (5) "science need not justify its work" it had a "nobler" calling in the tradition of Homer; knowledge of this world was of value itself and thus a source of enlightenment.⁹⁶

Conflicting, or alternative *stylistic repertoires* are chosen for their effectiveness in constructing different boundaries but this does not mean they are

⁹⁵ Gieryn, "Boundary Work," 785.

⁹⁶ Ibid., 786-787. The notion of the calling by scientists was similar to the notion of the vocation advocated by well-known Canadian social worker Charlotte Whitton.

“ill-chosen,” “disingenuous,” or fictional ideological efforts. Gieryn calls it a matter of pragmatics. Tyndall was aware of and “exploited” contemporary tensions in science between “basic versus applied” research and “empirical versus theoretical work,” selecting characteristics based on his context and audience, in order to muster support and funding for scientists.⁹⁷

Andrew Abbott argues that rhetorical boundary work is a fundamental strategy for those who want to enter the “system of professions.” It is necessary for achieving and maintaining public confidence, and establishing jurisdictional authority within an interdependent, competitive system.⁹⁸ Social workers, as part of the gendered system of professions, exploited similar tensions in science between practical and theoretical work, between natural and social science, and different ethical practices in science. They were also engaged in a modification process, in which they had to reconcile subjects’ previous understandings of themselves, so that social work (like nursing and home economics) could become a socially acceptable, scientific niche for women.⁹⁹

Theories of Professionalization

Most of the historical writing on female dominated occupations like nursing and social work has been shaped by a traditional paradigm emphasizing the

⁹⁷ Gieryn, “Boundary Work,” 787.

⁹⁸ Andrew Abbott, *The System of Professions: An Essay on the Division of Expert Labor* (Chicago and London: University of Chicago Press, 1988).

⁹⁹ Rima Apple describes the history of home economics as a scientific niche for women in Rima D. Apple, “Constructing Mothers: Scientific Motherhood in the Nineteenth and Twentieth Centuries.” *Social History of Medicine* 8, no.2 (1995): 161-178.

“processes of professionalization.”¹⁰⁰ Within the sociological literature there has been a similar focus and critique of the tendency to study the organization of individual professions, how or whether they acquired status, and stages on the road to professionalization.¹⁰¹ Most of the early work on professions in the Anglo-American literature was shaped by the prevailing functionalist perspective, which was “trait-based” meaning typologies of traits or attributes are used to measure inclusion or exclusion from professional status, or the degree to which an occupation acquired them. Medicine, law, and architecture were held up as prototypical professions and professionalism was treated as a “natural process” and “end-state” that very few groups achieved, or, in the case of social work, only achieved this status to a moderate degree.¹⁰²

In their history of science in social work, Kirk and Reid described Albert Flexner’s speech to a national conference of social workers at the beginning of the twentieth century as a “turning point,” when he claimed that social work was still not a profession by comparing it to medicine.¹⁰³ Flexner’s voice carried considerable authority because he had helped reform medical education, introduce licensing standards and raise the status of medicine. He was also influential in transforming

¹⁰⁰ Kathryn McPherson, *Bedside Matters: The Transformation of Canadian Nursing, 1900-1990* (Toronto, New York, Oxford: Oxford University Press, 1996); Carol Baines, “The Professions and the Ethic of Care,” in *Women’s Caring: Feminist Perspectives on Social Welfare*, ed., Carol Baines and Sheila Neysmith (Toronto: McClelland and Stewart, 1991).

¹⁰¹ Abbott, *The System of Professions*, 2-4; Anselm Strauss. “Professions in Process,” (with Rue Bucher) *The American Journal of Sociology* 66 (January 1961): 325-34. Strauss and Bucher provide the outline of a symbolic interactionist approach to studying the professions.

¹⁰² Abbott, *The System of Professions*, 2-4; Ernest Greenwood, “Attributes of a Profession,” 47-48.

¹⁰³ Kirk, Stuart and William J. Reid. *Science and Social work: A Critical Appraisal*. New York, Columbia University Press, 2002; Greenwood, 50.

the practice by joining “science and research” to “clinical practice.”¹⁰⁴ Social work scholar Laura Epstein provides support for the view that medicine represented the ideal type, showing how diagnostic regimes based on the “curative promise” of the medical model were used more frequently in the development of casework, changing the practice toward a “clinical casework” model.¹⁰⁵

Critics of the scientific turn and naturalist paradigm in sociology argue that the list of professional traits was politically motivated, self-interested, and structured by gender, used as a way to exclude occupations like social work. Howard Becker, as one critic, argued that what distinguished professionalism was an amorphous “spirit” that operated beyond the workplace and was equally attainable to social workers. Systems theorists, like Andrew Abbott, challenged the image of a “collegial organization” of professions based on the attainment of expertise.¹⁰⁶ Strauss and Bucher argued that the difference of the systems approach, from the prevailing functionalist approach in sociology, was that it focused on “conflicting interests and upon change” *within*, not just between professions.¹⁰⁷ The “assumption of relative homogeneity” within a profession posed problems for those studying professions; the reality is that there are many “identities, many values, and many interests.”¹⁰⁸ These differences could be understood as “segments” which are not simply variations; they are “patterned and shared; coalitions develop...[often] in

¹⁰⁴ Kirk and Reid, *Science and Social work*.

¹⁰⁵ Epstein, “Culture of Social Work,” 3-26.

¹⁰⁶ Strauss and Bucher, “Professions in Process,” 325-34; See also: Howard Becker, “The Nature of a Profession,” *Sociological Work: Method and Substance* (New Brunswick, N.J.:Aldine Publishing, 1977 [1970]), 87-103.

¹⁰⁷ Strauss & Bucher, 9.

¹⁰⁸ *Ibid.*, 10.

opposition to some others,” and sometimes in alliance with segments of other professions.¹⁰⁹

One of the most important aspects of acquiring the symbol and image of the professional, according to Becker, was that it provided a “justification and rationale” for autonomy in one’s work.¹¹⁰ Autonomy meant that only professionals could judge each other and this placed them outside the judgment of lay and other publics. According to Becker, one of the ways to measure the degree of stability, vulnerability or “realness” of a profession was its relative autonomy. Only “emerging professions” claimed their work was “hampered by the interference of laymen who [did] not fully understand all the problems involved, the proper standards to be used, or the proper goals to be aimed for.”¹¹¹ Based on his observations, social work was considered an emerging profession, particularly vulnerable in the postwar period, shown by the need for “interpretation work,” “standardization,” and “boundary-work.”

Systems theorists like Abbott view professions as part of an interacting ecology where conflict is inevitable and each competes within the system for jurisdiction. That means no one profession can be understood in isolation. The “success” of social work reflects the “situation of competitors” and the “system structure.”¹¹² Systems theorists also focus on the *content* of work not simply its

¹⁰⁹ Ibid., 10-17

¹¹⁰ Becker, “The Nature of a Profession,” 96; Greenwood, “Attributes,” 49. Greenwood puts “evaluation by peers” under the attribute “community sanction,” where standards are reached by professional consensus based on a body of theory. However this still requires promotional work.

¹¹¹ Becker, “The Nature of a Profession,” 97.

¹¹² Abbott, *The System of Professions*, 33-35.

function. This means asking: what kinds of tasks are people engaged in, and who are the people doing the work? These things are continually changing and do not exist in a finished state. Strauss and Bucher provide a useful working definition of professions that is complimented by SWAT analyses of how scientific networks are formed, in the “idea of professions as loose amalgamations of segments pursuing different objectives in different manners and more or less delicately held together under a common name at a particular period in history.”¹¹³

One focus of the thesis is to distinguish the kinds of *tasks* that social workers began to make claims over--what they claimed to do that no one else did. According to Strauss and Bucher, it is common in the beginning for segments to “proclaim unique missions” which meant outlining the contributions that only they could make in the “total scheme of values,” and why they were “particularly fitted for this task.”¹¹⁴ The rhetorical form the “statement of a mission” took arises “in the context of a battle for recognition and institutional status.”¹¹⁵ A “sense of mission” was not only used to distinguish social work from other professions, it can be analyzed as an indicator of segmentation within a profession.¹¹⁶ Adoption social workers emphasized their skill in the task of child *placement* based on their ability to interpret scientific and social knowledge, or the interplay between heredity and environment. Through the combined power of science and law they gained authority over the developmental supervision of children. But this did not leave them

¹¹³ Strauss & Bucher, “Professions in Process,” 10.

¹¹⁴ Ibid., 11.

¹¹⁵ Ibid.

¹¹⁶ Ibid.

invulnerable to intervention or challenges by other professionals when adoptions “failed.”¹¹⁷

According to Abbott, three modes of professional work tied a profession to a specific task: *diagnosis, treatment, and inference*. Competitors challenged other professions by providing conflicting interpretations (or diagnosis), promising different or better outcomes, and appealing to the degree of public satisfaction (or dissatisfaction).¹¹⁸ In the 1940s, social workers did the same thing in adoption. However, they provided new interpretations of childlessness, unwed motherhood, and adoption, by drawing on new knowledge from the fields of psychology, psychiatry, psychoanalysis, and genetics, in order to offer their own intervention in the formation of families.

Nikolas Rose suggests that the postwar II period represented a “free market in expertise” rather than a monopoly, as a “proliferation of experts” emerged and new specializations opened up to investigate and delineate more spaces of social existence.¹¹⁹ However, the analysis of gender remains opaque in his and Abbott’s accounts. Feminist scholars describe professions as “gendered institutions,” showing that doctors and social workers were engaged in a gendered “turf-war” and “division

¹¹⁷ Abbott, *The System of Professions*, 57-58

¹¹⁸ Abbott, *The System of Professions*. A familiar example is the growth of “alternative” health care practitioners (such as chiropractors, osteopaths, massage therapists, etc.) who filled the gaps left by public dissatisfaction with allopathic outcomes.

¹¹⁹ Nikolas Rose, “Psychiatry: The Discipline of Mental Health”, in *The Power of Psychiatry*, ed. Peter Miller and Nikolas Rose (Oxford: Blackwell, 1985), 43; Nikolas Rose, “Expertise and the Government of Conduct,” *Studies in Law, Politics and Society*. 14 (1994): 359-397.

of labour.”¹²⁰ From this perspective doctors’ authority depended on the subordination of professions like nursing and social work.

While Laura Epstein agrees that social workers borrowed freely from other experts, she also points out that they were unwelcome in the same disciplines, (psychiatry, psychology, psychoanalysis, and sociology). She contends that social work historians have still not considered the consequences of these alliances for the profession, society, the state and citizens, or how clinical ideas affected problems that were historically shaped by “racist, ethnic, gendered, and class tensions.”¹²¹

According to McPherson, the traditional paradigm of professionalization has been found lacking by feminist scholars who try to account for the subordination of female-dominated professions.¹²² Researchers have sought explanatory models that not only take gender into account, but also the relatively privileged position of social workers in relation to their clients, as well as other workers.¹²³ Similar issues are taken up by SWAT theorists, such as Clarke and Star, who incorporate the notion of split subjectivities and multi-positionality, as they go about exploring how alliances are forged in the building of scientific knowledge networks. Star focuses on who is being enrolled or partially enrolled, as well as who resists or is excluded from the

¹²⁰ Cynthia R. Comacchio, *Nations are Built of Babies: saving Ontario's mothers and children, 1900-1940* (Montreal: McGill Queen's Press, 1993); Epstein, “Culture of Social Work,” 3-26; Barbara Melosh, “More than ‘The Physicians Hand’: Skill and Authority in Twentieth-Century Nursing,” in *Women and Health in America: Historical Readings*, ed., Judith W. Leavitt (Madison, WI: University of Wisconsin Press, 1999), 482-416; Tracey L. Adams, “Professionalization, gender and female-dominated professions: Dental hygiene in Ontario,” *The Canadian Review of Sociology* (Aug. 2003): 267-289.

¹²¹ Epstein, “Culture of Social Work,” 12.

¹²² McPherson, *Bedside Matters*, 8; Adams, “Professionalization, gender and female-dominated professions,” 284.

¹²³ McPherson, *Bedside Matters*, 9-12.

network, but has to live within the context of new networks through the built environment--called “implicated actors.”¹²⁴

I build on their insights and draw on Adams, who provides a working definition of professionalization as a social movement “whereby occupational leaders pursue a number of strategies--including establishing expertise, cultural authority, market control, and social closure--to achieve professional status.”¹²⁵ As she contends, the sociological literature makes it clear that gender shaped the formation and establishment of professions, and the strategies of professionalization. However, Adams suggests that many female-dominated occupations used “gendered strategies” to not simply imitate but to also challenge traditional definitions of “profession” and “professionalism.”¹²⁶

At one level, social workers strategies appear similar to other female-dominated professions, in attempts to imitate the “male, medical model” and “ethos” of professionalism while still challenging it by emphasizing the “ethic of care.”¹²⁷ They began to formalize their training and search for a scientific body of knowledge, making “casework...the cornerstone of the profession,” where “investigation, co-ordination, and efficiency the hallmarks of casework practice.”¹²⁸ However, one of the historical tensions that shadowed social work was that “women’s special

¹²⁴ Susan Leigh Star, "Power, Technology and the Phenomenology of Conventions: On Being Allergic to Onions," in *The Sociology of Monsters: Power, Technology & Domination*, ed., John Law (London & New York: Routledge, 1991), 37-39, 51-52.

¹²⁵ Adams, “Professionalization, Gender,” 269.

¹²⁶ *Ibid.*, 284.

¹²⁷ *Ibid.*, 269-75

¹²⁸ Baines, “Professions and the Ethic of Care,” 57.

expertise and place within the professions” rested on “an ideology of service that lionized caring as a virtue particular to women.”¹²⁹

In the traditional functionalist literature, professionalism usually gets attributed to the attainment of a specialized body of theoretical knowledge and expertise, which forms the basis of diagnosis and inference, and must be accepted by the public. In contrast, historical accounts of female occupations that take gender into account demonstrate that the achievement of professionalism is really a reflection of “social power.”¹³⁰ Some women challenged the structures of power between and within professions and did not simply act as handmaidens to male professions.¹³¹ Nevertheless, the historical attempts and the impulse to professionalize also created and/or reinforced class and cultural divisions between women, who were not a universal group.¹³²

Feminist scholars have tended to focus on social power and epistemological struggles over what counts as knowledge and skill. Scientific and professional expertise is theorized as a credibility struggle in which “winners” achieve powerful social and material rewards.¹³³ Just as “service-work” had very different meanings for the women and men involved in health and social service professions, the ideals of “invisibility” and “modesty,” used to signify scientific objectivity, had very

¹²⁹ Ibid.,55.

¹³⁰ Baines, “Professions and the Ethic of Care,”37; McPherson, *Bedside Matters*, 8-17; Apple, “Constructing Mothers: Scientific Motherhood,” 161-178; Barbara Melosh, *Strangers and Kin: The American Way of Adoption* (Cambridge, MA, Harvard University Press, 2002).

¹³¹ Melosh, “More than ‘The Physicians Hand’”; Kathryn McPherson, review of “*The Physicians’ Hand*”: *Work, Culture and Conflict in American Nursing*, by Barbara Melosh, *Labour/Le Travail* 14 (Fall 1984): 273-275.

¹³² McPherson, review of “*The Physicians’ Hand*”; Melosh, “More than ‘The Physicians Hand.’”

¹³³ Gieryn, “Boundary Work,” 783; Baines, “Professions and the Ethic of Care,” np.

different meanings and implications for women and men. Critics argue, the “unmarked” neutral observer of science was assumed to be white, middle-class, Christian and male; therefore, by implication, the bodies of women and/or racialized others, meant their accounts were invested, subjective and biased.¹³⁴

Similar questions about the significance of gender to “profession formation” have animated feminist science studies, and led to debates about whether women and other marked bodies can embody the term professional, or scientist, if these terms are by definition “masculine.”¹³⁵ The dilemma this presents, according to Adams, is that if the system of professions is gendered and the title of professional (like scientist) is by definition male (white, middle-class male), can female-dominated occupations claim professional status?¹³⁶ And when they do, what strategies do female-dominated professions use and how do gender ideologies shape their efforts?

One of the earliest analytic frameworks used to interrogate the gendered system of professions was the medicalization model. Experts were depicted as male, “usually physicians,” and “science, medicine and professionalism in general were described in male terms.”¹³⁷ In this model, the dominant male gaze influenced observations, the kinds of questions asked, and reproduced the status quo. One of the most well documented social implications is the culture of “mother-blaming,”

¹³⁴ Donna Haraway, “Modest Witness: Feminist Diffractions in Science Studies,” in *The Disunity of Science: Boundaries, Contexts, and Power*, eds. Peter Galison and David J. Stump (Stanford, Stanford University Press: 1996), 428-441.

¹³⁵ Ibid.

¹³⁶ Adams, “Professionalization, gender,” 269.

¹³⁷ Apple, “Constructing Mothers: Scientific Motherhood,” 176.

arising from the growth of child-rearing advice in the early twentieth century, reflecting an Anglo-Saxon, middle-class, urban bias. The promotion of scientific motherhood undoubtedly changed the landscape for all women regardless of their resources and social position, placing greater demands on mothers.¹³⁸

At the same time, feminist scholars challenged the medicalization model, arguing that mothers, as agents, were often conflicted about accepting the tenets of scientific motherhood when it did not fit with their own experience, resources, or generational wisdom.¹³⁹ More recent work has shown that expertise came from multiple sites and players, both within and outside of medicine, demanding improvements to women's health.¹⁴⁰ The professions of social work, nursing, and home economics incorporated the work of women through socially acceptable roles, and these professions not only provided a scientific niche for women, they were central to the "growing acceptance of scientific motherhood."¹⁴¹

Numerous actors were engaged in "bio-medicalization" processes that contributed to the politicization of reproduction and "life itself" in the 20th century-- including professions dominated by women.¹⁴² In her history of nursing, Canadian historian Kathryn McPherson's describes themes common to social work history. As service occupations both professions were available to women, the contexts and

¹³⁸ Katherine Arnup, *Education for Motherhood: Advice for Mothers in Twentieth-Century Canada*. Toronto, Buffalo, London: University of Toronto Press, 1994; Nancy Weiss, "Mother, the Invention of Necessity: Dr. Benjamin Spock's Baby and Child Care." Special Issue: Reassessing Twentieth Century Documents. *American Quarterly* 29, no. 5 (1977): 519-546.

¹³⁹ Weiss, "Mother, the Invention of Necessity," 519-546; Arnup, *Education for Motherhood*.

¹⁴⁰ Apple, "Constructing Mothers," 161-178. McPherson, *Bedside Matters*.

¹⁴¹ Apple, "Constructing Mothers," 177.

¹⁴² Clarke et al, "Biomedicalization," 1-44.

conditions of their work were similar, and, equally important, the “trajectory” of both professions has complicated traditional accounts of labour and gender history.¹⁴³

Social work leaders tried to secure their own status by encouraging a relationship where clients “gave up” their own “judgment and responsibility leaving everything in the hands of the professional.”¹⁴⁴ Some scholars suggest they did this by modeling social work on “science,” while, simultaneously, drawing on a shared experience of gender to achieve the elusive quality of public trust.¹⁴⁵ Secondary literature that highlights the social differences between women, as both social work providers and clients, poses a challenge to simple identity-based history and interests, while still incorporating the structure of gender.

The professions of social work and nursing provided many women with relatively well-paid, independent and respectable careers, comfortably located within the middle-class.¹⁴⁶ Even when they were subordinated to male physicians and lawyers, the privilege of race and class also allowed many women to claim authority over other women (and some men). Women made up most of those who worked on the front-lines of social service work, and middle-class social workers had to negotiate between their own competing social identities—a professional identity and motherhood.

¹⁴³ McPherson, *Bedside Matters*, 5-13.

¹⁴⁴ Becker, “The Nature of a Profession,” 96-97.

¹⁴⁵ Epstein, “Culture of Social Work,” 3-26; Margolin, Leslie. *Under the Cover of Kindness: The Invention of Social Work* (Charlottesville and London, University Press of Virginia, 1997); Mary Fairweather, *Adoption Institute in Toronto* (1952):12 (MTA) CAS fonds 1001 Series 536.

¹⁴⁶ McPherson, *Bedside Matters*, 12-18.

As with nurses, gender and sexuality were used against social workers in paradoxical ways, regardless of efforts by male and female social work leaders to de-gender the profession.¹⁴⁷ Adoption social workers were accused of not having an appropriate “mothering instinct” because they did not have children of their own, and could not understand the needs of adoptive parents.¹⁴⁸ They also had to challenge the discourse of naturalism and demonstrate why social work skills were not simply an extension of their “natural” maternal abilities and duties; in part, this was an unintended consequence of maternalist strategies that defined femininity as an asset.¹⁴⁹

Most conventional accounts of social work history subsume science within the professionalization paradigm, leaving the meaning of science under-examined. Debates are often limited to whether social workers were excluded from science, whether social work was or could be properly scientific, or whether science “entered” social work and irrevocably changed it away from its radical community roots. As an alternative, I draw on conceptual resources from the social and cultural studies of science to examine how scientific knowledge is linked in “discontinuous, nonlinear ways” to cultural processes “outside its domain,” specifically adoption practice.¹⁵⁰ I examine the interplay and circulations between the sciences of heredity

¹⁴⁷ McPherson, *Bedside Matters*, 16. McPherson shows how nursing differed with regard to sexuality.

¹⁴⁸ The Children’s Aid and Infants’ Homes, *News Bulletin* 4, no.9 (1955) Review of “The Children Waiting,” by Pearl Buck, an article in the September issue of the *Woman’s Home Companion* (MTA) CAS fonds Box 90, File #7.

¹⁴⁹ Herman, “The Paradoxical Rationalization.”

¹⁵⁰ Haraway quoted in Emily Martin, “Cultural Study of Science.”

and psychology, the professionalization of social work, and, the cultural process of adoption.

Social Work and Adoption History

Social work was born in the years between 1880-1920, as philanthropists and community volunteers began to identify social problems associated with immigration and rapid industrialization in urban centers.¹⁵¹ In Canada, as in the U.K. and United States, a range of middle-class social reformers campaigned for the protection of mothers and children. Their diverse efforts led to the introduction of legislation, social policies (such as mother's pensions), and the founding of the semi-private Children's Aid Societies for the care of neglected and dependent children. In Ontario, the Child Protection Act was introduced in 1888 and by the 1920s, 73 Children's Aid Societies were established in the Province.¹⁵² From the beginning there would be two competing visions of reform, one influenced by the English Poor Laws and the other the more radical vision associated with the Settlement movements and people like Jane Addams in Chicago.¹⁵³

In Canada, many early reformers were part of the social gospel movement--a blend of Darwinism and socialism--which emphasized the need to change social

¹⁵¹ Theresa Jennissen and Colleen Lundy, *One Hundred Years of Social Work: A History of the Profession in English Canada 1900-2000* (Waterloo: Wilfrid Laurier Press, 2011).

¹⁵² John Bullen, "J.J. Kelso and the "New" Child-Savers: The Genesis of the Children's Aid Movement in Ontario," *Ontario History* 82, no. 2 (1990): 107-28.

¹⁵³ James Pitsula, "The Emergence of Social Work in Toronto," *Journal of Canadian Studies* 14, no. 1 (1979): 35-42; Gail Wills, "Values of Community Practice: Legacy of the Radical Social Gospel," *Canadian Social Work Review* 9, no.1 (1992): 28-40.

conditions rather than blame individuals.¹⁵⁴ Others were influenced by the more conservative, social purity doctrine and charitable traditions based on the Poor Laws in England.¹⁵⁵ The legacy of early reform efforts remains with us in two competing visions, or ideologies, of social responsibility: *charity versus justice*.¹⁵⁶

As a social activity Christian benevolence was valued precisely because of its voluntary nature and “face to face” contact which “ennobled the giver and receiver” so when the work was paid for and done by intermediaries or social workers it was criticized and considered mercenary.¹⁵⁷ But as demands for poor relief grew, the voluntary ideal was harder to maintain and professionally trained social workers were needed. The concentration of individuals in cities meant that charity was no longer an adequate solution to social problems that were linked with industrialization and urbanization.¹⁵⁸

While many of the early charity volunteers were business and professional men, at the close of the 19th century and into the early decades of the 20th century this work was increasingly done by poorly paid women as social workers.¹⁵⁹ Pitsula and Irving describe the transformation away from Christian benevolence toward

¹⁵⁴ Linda Kealey, “Introduction” *A Not Unreasonable Claim*, (Toronto: Women’s Press, 1979); Phillips, “Blood Not Thicker Than Water.”

¹⁵⁵ Mariana Valverde, *The Age of Light, Soap and Water: Moral Reform in English Canada, 1885-1925* (Toronto, McClelland and Stewart, 1991).

¹⁵⁶ *Ideas* CBC radio program, philosophers’ panel discussion social responsibility.

¹⁵⁷ Pitsula, “The Emergence of Social Work in Toronto,” 37-38.

¹⁵⁸ Pitsula, “The Emergence of Social Work in Toronto,” 37-38.

¹⁵⁹ Wills, “Values of Community Practice,” 28-40; Karen Murray, “Governing ‘Unwed Mothers’ in Toronto at the Turn of the Twentieth Century,” *The Canadian Historical Review* 85, no. 2 (2004): 253-276.

scientific, professional casework.¹⁶⁰ A new order based on "efficiency and economy" supposedly replaced "preaching and moralizing" and a new "social welfare" was "made possible by the application of technique to philanthropy and those with mastery of the technique tried to constitute themselves as a new profession."¹⁶¹ Many historians have concluded that, "[T]he penetrating influence of science in the early twentieth century lay behind the impulse to adopt the medical model as a central paradigm for social work practice by the 1920s."¹⁶²

In Toronto, the Associated Charities Organization and its replacement, the Social Service Commission, paved the way for the emergence of social work.¹⁶³ The early charities, orphanages, and settlement houses were part of the social gospel effort to effect social change and they served as training ground for many social workers.¹⁶⁴ The Social Service Council of Canada formed alliances with churches, labour, and social reformers, eventually publishing the periodical *Social Welfare*, providing platforms for the discussion of ideals during the 1920s.¹⁶⁵ The organization was eventually "displaced" by the Canadian Association of Social Workers [CASW] and the Canadian Conference of Social Work. The new focus on professionalization,

¹⁶⁰ Pitsula, "The Emergence of Social Work," 35-42; Allan Irving, "The Scientific Imperative in Canadian Social Work: Social Work and Social Welfare Research in Canada, 1897-1945," *Canadian Social Work Review* 9, no. 1 (1992): 9-25.

¹⁶¹ Pitsula, "The Emergence of Social Work," 40.

¹⁶² Irving, "The Scientific Imperative," 10.

¹⁶³ Pitsula, "The Emergence of Social Work," 35-42.

¹⁶⁴ Wills, "Values of Community Practice," 28-40.

¹⁶⁵ *Ibid.*, 30.

and the formation of the CASW, was spurred by a desire to distinguish the Canadian profession from its U.S. and U.K. counterparts, influential in its development.¹⁶⁶

The decades between 1920-1939 are described as “the age of professionalism” because social services were fundamentally changed through processes of professionalization.¹⁶⁷ As new schools of social work opened in Canada, leaders, such as Charlotte Whitton, advocated professional training standards and emphasized the importance of *interpreting* the nature of their work to the public, highlighting the technical nature of their work.

Many of the young women who originally entered social work in the 1920s and 30s had been influenced by the radical social gospel movement, which differed from the liberal reform movement influenced by the British Fabian tradition’s commitment to science.¹⁶⁸ The social gospel tradition focused on social rather than individual reform and was a kind of Christian socialism that called for a new social order to counter the materialism of capitalist, industrial society. But increasingly, the mainly female-dominated agencies where pregnant women and other destitute individuals initially made contact were accused of having no firm scientific footing and had to respond. Many historians agree that these criticisms led social workers to

¹⁶⁶ Jennissen and Lundy, *One Hundred Years of Social Work*.

¹⁶⁷ John McCullagh, *A Legacy of Caring: A History of the Children's Aid Society of Toronto* (Toronto & Oxford: Dundurn Press, 2002), 66-93.

¹⁶⁸ Diane Paul, *The Politics of Heredity: Essays on Eugenics, Biomedicine, and the Nature-Nurture Debate* (Albany, SUNY Press 1998). Paul examines the link between the Fabian tradition and eugenics. The Fabian tradition is associated with the London School of Economics and the Webbs who did not believe in full equality. See also: Gail Wills, *A Marriage of Convenience: Business and Social Work in Toronto, 1918-1957* (Toronto, University of Toronto Press, 1995).

adopt “the medical model” and turn poor relief into a technical matter requiring “expertise.”¹⁶⁹

Nonetheless, Ken Moffatt argues that the move to scientism and technology in social work was not universally applauded. Some Canadian leaders and professors at the time were critical of the scientizing tendency because it moved the profession away from explanations that emphasized structural conditions, toward psychological, moral or individualistic explanations.¹⁷⁰ According to Moffatt, while many social workers did seize the language of science, the move was, in part, a challenge made by male academics to distance themselves from the gendered nature of social work in which humanist ethics and the practical knowledge of women working in impoverished communities was replaced by objective practices modeled on the natural sciences.¹⁷¹

As Wills suggests, “[T]he new profession of social work professed to be rigidly secular, requiring its practitioners to replace moral judgment with ‘judgment based on fact’” and “science” but the organization was still filled with members of the social gospel tradition.¹⁷² This allowed social work to at least espouse the new secular values and eschew religious and moral principles while doing social casework. She argues that, “the mainstream of social work was Protestant, Anglo-

¹⁶⁹ Irving, “The Scientific Imperative,” 9-25; Pitsula, “The Emergence of Social Work,” 35-42; Sharon L. Snyder and David T. Mitchell, “Out of the ashes of eugenics: diagnostic regimes in the United States and the making of a disability minority,” *Patterns of Prejudice* 36, no.1(2002): 79-103.

¹⁷⁰ Ken Moffatt, *A Poetics of Social Work: Personal Agency and Social Transformation in Canada, 1920-1939* (Toronto: University of Toronto Press, 2001).

¹⁷¹ Moffatt, *A Poetics of Social Work*; Wills, “Values of Community Practice,” 31.

¹⁷² Wills, “Values of Community Practice,” 31; Irving, “The Scientific Imperative,” 9-27; Pitsula “The Emergence of Social Work,” 35-42.

Saxon, and liberal."¹⁷³ This view is supported by recent research in Canadian adoption history that shows there was popular resistance to publicly regulated agencies in French Catholic Quebec.¹⁷⁴ The seeming paradox, however, is that social casework methods were appropriated by the Catholic Church and religious organizations, in Ontario, Prince Edward Island, and Quebec.¹⁷⁵

The Catholic Church continued to significantly influence social policy and public institutions, and guide the operation of techniques, including social case-work. Heidi MacDonald has shown how “women religious” orders on Prince Edward Island “expanded the social welfare state to their advantage.”¹⁷⁶ And while MacDonald and Maurutto provide compelling accounts of women religious in the delivery of social services, and the subsequent impact of the Catholic Church on hospital policy, adoption remains outside of the scope of their research. The gap is worth exploring because the Sisters of Saint Martha and St. Joseph managed adoption before, during and after the postwar period, suggesting fertile ground for future research.¹⁷⁷

¹⁷³ Methodist clergyman quoted in Wills, "Values of Community Practice," 31.

¹⁷⁴ Karen Balcom, *The Traffic in Babies: Cross-Border Adoption and Baby-Selling between the United States and Canada, 1930-1972* (Toronto Buffalo London: University of Toronto Press, 2011).

¹⁷⁵ Andrée Lévesque, "Deviant Anonymous: Single Mothers at the Hôpital de la Miséricorde in Montreal, 1929-1939," in *Rethinking Canada: The Promise of Women's History*, ed., Veronica Strong-Boag and Anita Clair Fellman (Toronto: Copp-Clark Pitman, 1991); Paula Maurutto, *Governing Charities: Church and State in Toronto's Catholic Archdiocese, 1850-1950* (PhD diss, York University, 1998); Heidi MacDonald, "Maintaining an Influence: The Sisters of Saint Martha, Charlottetown, Respond to Social and Religious Change, 1965-85," *Atlantis* 32, no. 1 (2007): 91-99. This is discussed in more detail elsewhere.

¹⁷⁶ One piece of evidence that MacDonald provides to show the Catholic Church's historic influence on the medical-moral code in the Province, is the fact that there are still no therapeutic abortions on PEI. See MacDonald, "Maintaining an Influence," 91-99.

¹⁷⁷ Support for this comes from personal written correspondence from Sister D. May 2013, one of the Sisters still living on the Island, who is actively involved in adoption reunions.

Gender was central to the “transformation” of both the welfare system and Canadian health-care system, and it shaped the experiences of women as providers and clients within both systems. McPherson describes a number of “comparable processes” that shaped the health-system in Canada like “most Western nations.”¹⁷⁸ The similar processes that shaped the health and welfare systems included the “ascent of medical control,” the shift from charitable institutions to public “therapeutic” ones, “the growing intervention of the State” in health and social services, and the “reformation” of skilled [social work and] nursing practice.¹⁷⁹ The relationship between the health and welfare systems appears as a recurring theme in the history of adoption because from the outset the discourses of public health and social work influenced its development. The boundaries were blurred because both providers were concerned with infant and maternal mortality.

Feminist Writing on the Welfare State

By the time the first adoption Act was passed in 1921, Arnold Toynbee, the social reformer and English economist had already publicly declared that the most pressing problem of the 20th century was making “benevolence scientific.”¹⁸⁰ In Ontario, this led to an increase in “professionally trained social workers” and support from the provincial government to aid in their scientific training, for greater

¹⁷⁸ McPherson, *Bedside Matters*, 6.

¹⁷⁹ McPherson, *Bedside Matters*, 6-8

¹⁸⁰ Irving, "The Scientific Imperative," 9-27.

efficiency.¹⁸¹ Adoption historians tend to accept that the post WWII years culminated in the “long process of professionalization” by social workers, who “sought the aid of the state to regulate adoptions.”¹⁸² But social workers still had to convince the public why special training was required because much of the work was assumed to be part of women’s “‘natural’ maternal responsibilities in the public sphere.”¹⁸³ Adoption historian Ellen Herman argues that social workers had to change the public image of social work from one of “common-sense maternalism” to skilled social work as a “gender-blind specialization,” a challenge she believes was met by modern adoption workers.¹⁸⁴

According to U.S. adoption historians, by the 1940s, “the movement to reform child-placing practices....became the *raison d’être* of professional social workers.”¹⁸⁵ After WWII, Canadian social workers and psychologists carved out an important role for themselves as national gate-keepers, and adoption can be analyzed as part of this overall process.¹⁸⁶ Iacovetta has shown that the demand for settlement and social services increased because of an influx of immigrants from non Western

¹⁸¹ Margaret Little, "The Blurring of Boundaries: Private and Public Welfare for Single Mothers in Ontario." *Studies in Political Economy* 47 (1995): 98.

¹⁸² Wayne Carp, *Family Matters: secrecy and disclosure in the history of adoption*. Cambridge, Mass., Harvard University Press, 1998:15; Herman, *Kinship by Design*; Jennissen and Lundy. *One Hundred Years of Social Work*.

¹⁸³ Ellen Herman, "The Paradoxical Rationalization of Modern Adoption." *Journal of Social History* 36, no. 2 (2002): 339-385; Ellen Herman, "Families Made by Science: Arnold Gesell and the Technologies of Modern Child Adoption." *ISIS* 92 (2001): 684-715.

¹⁸⁴ Herman, "The Paradoxical Rationalization," 339-385.

¹⁸⁵ Wayne Carp, *Family Matters*; Wayne E. Carp and Anna Leon-Guerrero, "When in Doubt, Count: World War II as a Watershed in the History of Adoption," in *Adoption in America: Historical Perspectives*, ed., Wayne E. Carp (Ann Arbor, University of Michigan Press, 2002), 181-217; Herman, *Kinship by Design*; Melosh, *Strangers and Kin*.

¹⁸⁶ Franca Iacovetta, *Gatekeepers: Reshaping Immigrant Lives in Cold War Canada* (Toronto, Between the Lines, 2006); Mona Gleason, *Normalizing the Ideal: Psychology, Schooling, and the Family in Postwar Canada* (Toronto: University of Toronto Press, 1999).

European countries, and social workers made themselves fundamental to the process of building ideal democratic families.¹⁸⁷

While feminist welfare historians have documented the idealization of motherhood in the formation of nation states, there has been less attention on the unmarried “maternal body,” which “became a central focus in the developing welfare policies of the state.”¹⁸⁸ Historically, unwed mothers have been targets of child-saving interventions, and their children continued to represent nearly half of all adoptions in most Western nations.¹⁸⁹ Yet, English Canadian scholars have devoted less attention to adoption even though the postwar is described as a period of reconstruction for child welfare services.¹⁹⁰

Ellen Ross argues that conceptions of motherhood are often at the center of contemporary social controversies though it is not usually acknowledged.¹⁹¹ Over the course of the 20th century, motherhood became a privilege and not a *natural* right, through the introduction of child welfare laws, interventions by experts, and forms

¹⁸⁷ Iacovetta, *Gatekeepers*; Patti Phillips, “Financially irresponsible and obviously neurotic need not apply”: Social Work, Parental Fitness, and the Production of Adoptive Families in Ontario, 1940-1965.” *Histoire sociale/Social History* 39, no.78 (2006): 329-358; Veronica Strong-Boag *Finding Families, Finding Ourselves: English Canada Encounters Adoption from the Nineteenth Century to the 1990s* (Toronto, New York: Oxford University Press, 2006); Karen Dubinsky, *Babies without Borders: Adoption and Migration across the Americas* (University of Toronto Press, 2010).

¹⁸⁸ Molly Ladd-Taylor, *Mother-Work: Women, Child Welfare, and the State, 1890-1930. Urbana and Chicago: University of Illinois Press*, 1994; Anna Davin, ‘Imperialism and Motherhood,’ *History Workshop Journal* 5 (1978) : 9-65.

¹⁸⁹ Margaret Little, *No car, no radio, no liquor permit: the moral regulation of single mothers in Ontario, 1920-1997* (Toronto: Oxford University Press, 1998); Jane Lewis and John Welshman, “The Issue of Never-Married Motherhood in Britain, 1920-70,” *Social History of Medicine* 10, no.3 (1997): 401-418; Pat Thane, “Unmarried Motherhood in Twentieth-Century England,” *Women’s History Review* 20, no.1 (2011): 11-29; Maria Luddy, “Unmarried Mothers in Ireland, 1880-1973,” *Women’s History Review* 20, no.1 (2011): 109-126.

¹⁹⁰ Jennissen and Lundy, *One Hundred Years of Social Work*; Moffatt, *A Poetics of Social Work*; James Struthers. *The Limits of Affluence: Welfare in Ontario, 1920-1970* (Toronto, University of Toronto Press, 1994).

¹⁹¹ Ellen Ross, *Love and Toil: Motherhood in Outcast London, 1870-1918* (New York & Oxford: Oxford University Press, 1993).

of moral regulation.¹⁹² The history of adoption reveals how the problematic of “nationalism and gender” intersected with debates over “health and reproduction.”¹⁹³

Incorporating the problematic of nationalism in a case study of adoption widens our focus to consider the ways that women and their children are placed in “symbolic relation to the nation.”¹⁹⁴ Feminist critiques of modernity urge us to look for diverse forms of collaboration and conflict over meanings of nation and national identity that are waged over the female body.¹⁹⁵ Julia Kristeva wrote that the mother is “the threshold on which nature and culture confront one another,” and adoption shows how these struggles are not only waged *within* but *between* female bodies.¹⁹⁶

The nature-culture divide is most visible in the relationship between birth and adoptive mothers, but can be applied to social workers, as “social” mothers.

¹⁹² Ross, *Love and Toil*; Little, “The Blurring of Boundaries,” 89-109; Marlee Kline, “Complicating the Ideology of Motherhood: Child Welfare Law and First Nation Women,” *Queen's Law Journal* 18 (1993): 306-42; Dorothy Chunn and Shelley Gavigan, “From Mother's Allowance to Mothers Need Not Apply: Canadian Welfare Law as Liberal and Neo-Liberal Reforms,” *Osgoode Hall Law Journal* 45, no. 4 (2007): 733-771; Dorothy Chunn and Shelley Gavigan, “From Welfare Fraud to Welfare as Fraud: The Criminalization of Poverty,” in *Criminalizing Women*, ed., C. G. Balfour (Halifax, Fernwood Publishing, 2006), 217-235.

¹⁹³ Georgina Feldberg, Molly Ladd-Taylor, Alison Li, and Kathryn McPherson, “Introduction,” in *Women, Health and Nation: Canada and the United States since 1945*, ed. Georgina Feldberg, Molly Ladd-Taylor, Alison Li, and Kathryn McPherson (Montreal, Kingston, London, Ithica: McGill-Queen's University Press, 2003).

¹⁹⁴ Inderpal Grewal and Caren Kaplan, “Introduction,” in *Scattered Hegemonies: Postmodernity and Transnational Feminist Practices*, ed. Inderpal Grewal and Caren Kaplan (Minneapolis, London: University of Minnesota Press, 1994), 22; Karen Dubinsky, “Babies Without Borders: Rescue, Kidnap, and the Symbolic Child,” *Journal of Women's History* 19, no. 1 (2007): 142-150; Caroline F. Levander, *Cradle of Liberty: Race, the Child, and National Belonging from Thomas Jefferson to W.E.B. Du Bois* (Durham & London: Duke University, 2006); Sharon Stephens, “Editorial Introduction: Children and Nationalism,” *Childhood* 4, no. 5 (1997): 5-17.

¹⁹⁵ Ann Laura Stoler, *Race and the Education of Desire: Foucault's History of Sexuality and the Colonial Order of Things* (Durham and London: Duke University Press, 1995).

¹⁹⁶ Julia Kristeva quoted in: Ross, *Love and Toil*, 4.

Within the adoption literature, birth and adoptive mothers are frequently placed in conflict with each other.¹⁹⁷ As Canadian adoption historian Karen Balcom observes, when the voices of birth mothers are included it is hard to “feel good” about adoption.¹⁹⁸ Part of the problem with this dichotomy is that it still ignores the central mediating role of social workers; as brokers they acted on behalf of the Province and negotiated between mothers.

Molly Ladd-Taylor introduced the concept of *motherwork* to show how and why motherhood was a political and social issue. Motherwork had two parts; the first was childrearing, or private work done at home, raising citizens, workers and/or soldiers; and second was the public work of maternalist reformers and social workers, or “social mothering,” done within the community.¹⁹⁹

She further distinguished “sentimental” from the “progressive” maternalists who made maternal and child welfare reforms a priority, more in line with social science and professionalism.²⁰⁰ Though sentimental maternalists were concerned with poverty and fought for mother’s pensions for dependent women, they did not extend the benefit to working-class men or wage-earning women.²⁰¹ In both Canada and the United States, maternalist reformers never assumed that pensions were

¹⁹⁷ Ricki Solinger, *Wake Up Little Susie: Single Pregnancy and Race Before Roe v. Wade* (New York, Routledge, 1992); Melosh, *Strangers and Kin*; Karen Balcom, “Constructing Families, Creating Mothers: Gender, Family, State and Nation in the History of Child Adoption,” *Journal of Women's History* 18, no.1 (2004): 219-232.

¹⁹⁸ Balcom, “Constructing Families,” 219-232.

¹⁹⁹ Ladd-Taylor, *Mother-Work*, 2; Ross, *Love and Toil*; Arnup, *Education for Motherhood*; Weiss, “Mother, the Invention of Necessity,” 519-546.

²⁰⁰ Ladd Taylor, *Mother-Work*, 9. For example, progressive maternalists were active in establishing Hull House and United States Children’s Bureau (USCB).

²⁰¹ Ladd-Taylor, *Mother-Work*, 8.

meant to support unmarried mothers.²⁰² The majority did not challenge the nineteenth century ideology and “doctrine of separate spheres,” accepting the ideal of women’s economic dependence on a male (family) wage.

Maternalists believed that women were united across social differences because of their capacity for motherhood and were valued for raising citizens and workers.²⁰³ However, one of the contradictions was that while most maternalists were unmarried they still assumed that most women wanted to marry, stay home and raise children. The choice was marriage or a career. Early feminists, in contrast, focused on achieving women’s economic, political, and sexual independence outside of their relationships to men.²⁰⁴ Yet, even they had a “blindspot” when it came to theorizing motherhood outside of women’s relationships with men. Feminist sociologist Roberta Hamilton contends that contemporary social arrangements still reflect the fact that the “world is still organized as if all women who mother have a husband carrying most of the economic burden of raising children,” “despite the rhetoric” about revaluing motherhood in the late 20th and [early 21st] centurie(s).²⁰⁵

The influence of maternalism in adoption was based on an ideology that had three interlocking parts: “changes to middle-class domestic work,” ideas about “scientific motherhood,” and fears about “race suicide.”²⁰⁶ The rhetoric of race

²⁰² Little, *No car, no radio*.

²⁰³ Ladd-Taylor, *Mother-Work*, 3; Mariana Valverde, " 'When the Mother of the Race is Free': Race, Reproduction, and Sexuality in First-Wave Feminism," in *Gender Conflicts*, ed. Franca Iacovetta & Mariana Valverde, (Toronto: University of Toronto Press, 1992), 3-26.

²⁰⁴ Ladd-Taylor, *Mother-Work*.

²⁰⁵ Roberta Hamilton, *RFR/DFR* (1991): 29.

²⁰⁶ Ladd-Taylor, *Mother-Work*, 4-5; Davin, “Imperialism and Motherhood,” 9-65; Nancy Fraser and Linda Gordon, "A Genealogy of Dependency: Tracing a Keyword of the U.S. Welfare State," *Signs*:

suicide was a response to the rapid influx of immigrants, the negative effects of industrialization, and urban growth, all of which fostered fear about crime and family breakdown in the Anglo-American context. The ideology was reworked more than once in the first half of the 20th century, and by the 1940s scientific motherhood displaced moral and religious prescriptions with scientific and medical ones.²⁰⁷

First nations women, poor women and unmarried mothers would make up the largest categories of those classified as *unfit* through child welfare legislation and motherhood ideology.²⁰⁸ While protection and assimilation strategies were most often used to remove First Nations' children from families who did not "voluntarily" relinquish them, by the middle of the 20th century "prevention" discourse and "enhancement" as therapeutic strategies were directed at unmarried mothers whose children were classified as potentially adoptable.

The response to "race suicide" in the 1920s and 1930s involved prevention strategies that included preventing "feeble-minded" or "mentally defective" young women from reproducing and contributing to the ranks of the "defective" in Canada.²⁰⁹ Prevention discourse justified various legal and "extra-legal" practices

Journal of Women in Culture and Society 19, no. 2 (1994): 309-336; Valverde, "When the Mother of the Race is Free," 3-26.

²⁰⁷ Ladd-Taylor, *Mother-Work*, 4; See also: Apple, "Constructing Mothers: Scientific Motherhood," 161-178; Cynthia Comacchio, "Mechanomorphy: Science, Management, and "Human Machinery" in Industrial Canada, 1900-45," *Labour/Le Travail* 41 (1998): 35-67.

²⁰⁸ Kline, "Complicating the Ideology of Motherhood," 306-342; Marlee Kline, "Child Welfare Law, 'Best Interests of the Child' Ideology, and First Nations." *Osgoode Hall Law Journal* 30, no. 2 (1992): 375-425.

²⁰⁹ Comacchio, *Nations are Built of Babies*; Jennifer Stephen, "The 'Incorrigible,' the 'Bad,' and the 'Immoral': Toronto 'Factory Girls' and the Work of the Toronto Psychiatric Clinic," in *Law, State and Society: Essays in Modern Legal Authority*, ed., Louise Knafla and Susan Binnie (Toronto: University of Toronto Press, 1995), 405-39; Deborah C. Radford and J. P. Park, "From the Case Files: reconstructing a history of involuntary sterilization," *Disability and Society* 13, no. 3 (1998): 317-342.

and negative strategies such as incarceration, institutional supervision, sterilization and deportation, in the case of immigrants.²¹⁰ In contrast, in the 1940s and 1950s adoption could be reinterpreted as a positive nation-building strategy aimed at making “fit” families and strengthening the country after the losses of WWII.²¹¹ Recently, social work scholars have begun to rethink the tendency by historians to uncritically accept the discourses of *fitness* that justified state interventions, permanently severing parental and/or community rights.²¹²

To a positive extent, social workers challenged assumptions about compulsory motherhood and women’s innate biological differences and capacity for nurturing by constructing new meanings of motherhood. They portrayed adoptive mothers as *social* mothers who “chose” motherhood. However, it was only a small step to consider adoptive motherhood as the “ideal type” of scientific motherhood and irrational others (e.g. unplanned for and/or accidental pregnancy) as failures.²¹³ Adoption helped to realize the intertwining goals of scientific motherhood, eugenic

²¹⁰ Stephen, "The 'Incorrigible,' the 'Bad,' and the 'Immoral,'" 405-39

²¹¹ Phillips, "'Financially irresponsible,'" 329-358.

²¹² Shurlee Swain, "Enshrined Law: Legislative Justification for the Removal of Indigenous and Non-Indigenous Children in Colonial and Post-Colonial Australia." Workshop Paper. *Sixteenth Berkshire Conference on the History of Women 2014* (University of Toronto, Toronto ON, 2014), 1-24; Christina Firpo and Margaret Jacobs, "Imagined Families: Colonialism, Nationalism, and Child Removals, 1890-1980." Workshop Paper, *Sixteenth Berkshire Conference on the History of Women* (University of Toronto, Toronto ON, 2014), 1-40; Shurlee Swain, "Adoption, Secrecy and the Spectre of the True Mother in Twentieth-Century Australia." *Australian Feminist Studies*, Vol. 26, no. 68 (June 2011): 193-213.

²¹³ Evelyn Glenn, "Social Construction of Mothering: A Thematic Overview," in *Mothering: Ideology, Experience and Agency*, ed., Evelyn N. Glenn, Grace Change and Linda Rennie Forsey (Routledge: New York, London, 1994); Melosh, *Strangers and Kin*; Balcom, "Constructing Families, Creating Mothers," 219-232.

reform, and maternal feminism, through the practical activities of the predominantly female-profession of social workers.²¹⁴

It was not only social workers and other experts who drew on these images and identities. The emphasis on scientific motherhood allowed some “childless” women to argue they were particularly suited to parenthood because they had made an educated choice to be mothers.²¹⁵ Adoptive mothers made a positive claim to motherhood by appropriating the discourse of *scientific* motherhood and portraying the *intentionality* of their difference as superior to mere “natural” motherhood, rather than their social class.²¹⁶ However, they still had to prove their suitability to a variety of experts and meet the requirements of normative motherhood--underpinned by the natural bias.

What is often obscured is how the discourse of scientific motherhood begun at the beginning of the century was personified in the image of the social worker. Social workers effectively stood in as “surrogates” when children were relinquished by birth parents, or removed through the power of “protection” laws because of real or perceived neglect.²¹⁷ Once children were made wards of the state, and ties to birth families were severed, doctors no longer had unmediated access to mother and child. By presenting their own practices as scientific, adoption social workers gained a

²¹⁴ Murray, "Governing 'Unwed Mothers' in Toronto," 253-276.

²¹⁵ Glenn, "Social Construction of Mothering."

²¹⁶ Balcom, "Constructing Families," 219-232. Herman says that adoptive families are still anomalies because they are overrepresented in the ranks of the middle and upper classes, and those with higher levels of education. Middle-class couples continued to be chosen more frequently in Ontario in the 1940s and since then.

²¹⁷ The term surrogate mothers in reference to social workers is derived from Anna Davin, "Imperialism and Motherhood," 9-65.

significant role in determining the “relations of caring” and developmental supervision of children, shaping the body politic.²¹⁸

²¹⁸ Baines, “Professions and the Ethic of Care.”

Chapter Two

The Origins of Scientific Adoption Practice, 1880-1930

Adoption and social work historians emphasize dramatic changes in the post WWII period as adoption practices became modern, professional and scientific. At the same time, scholars acknowledge that many of these changes began in the 1920s and 30s, and were vital in shaping postwar developments. The formulation of adoption standards, begun during the 1930s, ostensibly led to changes in practice, and more parents wanting children to adopt. In turn, the successful placement of children for adoption would lead to transformations within the fields of medicine and science.

Scholars and social work practitioners typically describe modern adoption practice as the end point of three phases: the indenture practices of the 1880s-1920s; the introduction of adoption legislation in the 1920s; and the establishment of scientific adoption practice, regulated by professional social workers in the 1940s and 50s.¹ The same trajectory is usually given for the U.S. and Canada. Both countries experienced social and economic transformations due to rapid industrialization, urbanization and immigration, leading to demands for government intervention, while protecting “liberal sensibilities.”² In addition, welfare leaders in

¹ I found repeated reference to three phases of modern adoption practice, in the social work literature and scholarly work on adoption history. The 1921 Adoption Act in Ontario introduced similar legislative reforms as those in some States of the U.S. during the same period.

² Therese Jennissen and Colleen Lundy, *One Hundred Years of Social Work: A History of the Profession in English Canada 1900-2000* (Waterloo: WLU Press, 2011); Karen Murray, "Governing 'Unwed Mothers' in Toronto at the Turn of the Twentieth Century," *The Canadian Historical Review* 85, no. 2 (2004): 253-276; Wayne E. Carp, "The Rise of Adoptions," in *Family Matters: Secrecy and*

both countries tried to clamp down on cross-border adoptions and worked closely together to develop child welfare policies.³ Some historians suggest there continued to be more tolerance for privately arranged adoptions in the United States (in contrast to Canada) and publicly funded social workers did not gain complete professional authority via “the best interests of the child” discourse.⁴ However, I use this particular case study of social workers, at the Protestant CAS’ of Ontario, to show that the struggle for professional authority was never completely closed but involved ongoing processes of negotiation.

While the presence of social work professionals in adoption is taken as self-evident today, it was not inevitable. The struggle for cognitive authority in adoption first entailed a process of “making-up people” in relation to new social problems: professional social workers and adoptable children.⁵ During the 1920s and 30s, most social service providers were either opposed to or ambivalent about adoption. I provide support for the view that an anti-adoption bias had to be overcome before professional adoption would become the norm.

The interpretation of social problems was influenced by two dominant discourses in the pre-welfare era: moral welfare and public health discourse.⁶ During this period, a diverse range of social, scientific, and medical reformers turned their

Disclosure in the History of Adoption (Cambridge, Mass. & London, England: Harvard University Press, 1998), 1-35.

³ Karen Balcom, *The Traffic in Babies: Cross-Border Adoption and Baby-Selling between the United States and Canada: 1930-1972* (Toronto, Buffalo and London: University of Toronto Press, 2011).

⁴ Shurlee L. Swain, Review of *Adoption in America: Historical Perspectives* by Wayne E. Carp, ed., June (2003)1-3. <http://www.h-net.org/reviews/showrev.php?id=7663>.

⁵ Ian Hacking, “Making Up People,” in *Historical Ontology* (Cambridge, London: Harvard University Press, 2002), 99-111.

⁶ Jane Lewis and John Welshman, “The Issue of Never-Married Motherhood in Britain, 1920-70,” *Social History of Medicine* 10, no.3 (1997): 401-418.

attention to the problem of unwed mothers and their children, who were represented as a moral threat and threat to national efficiency.⁷ Social work leaders began to construct a professional identity by focusing on meeting the newly identified needs of potential adoptive parents. By only placing “blue-ribbon” babies, they also helped to constitute the concept of “adoptability” and, with it, an image of the normal child.

In this chapter I set the stage by locating four elements of modern adoption practice that were established in the 1920s and 30s. They include changing conceptions of childhood and motherhood reflected in legislative and regulatory changes; new concern for the professional management of adoption; persistent gender and class dynamics; and the politics of heredity (popularized in the nature-nurture debate).

Conceptions of Childhood and Child Welfare Reforms (1880-1920)

In the early twentieth century, middle-class professionals helped to reconstruct conceptions of childhood many times in response to social, political, and economic challenges, but they also contributed to these challenges.⁸ Karen Dubinsky describes the historic tension between “kidnap and rescue” narratives that shaped

⁷ Cynthia Comacchio, "Mechanomorphy: Science, Management, and Human Machinery in Industrial Canada, 1900-45," *Labour/Le Travail* 41 (1998): 35-67.

⁸ Henry Hendrick, "Constructions and Reconstructions of British Childhood: An Interpretive Survey, 1800 to the Present," in *Constructing and Reconstructing Childhood: Contemporary Issues in the Sociological Study of Childhood*, ed. Allison James and Alan Prout (London, New York and Philadelphia: The Falmer Press, 1990), 36; Jo Boyden, "Childhood and the Policy Makers: A Comparative Perspective on the Globalization of Childhood," in *Constructing and Reconstructing Childhood: Contemporary Issues in the Sociological Study of Childhood*, ed. Allison James and Alan Prout (London, New York and Philadelphia: Falmer Press, 1990), 184-215. In Canada see: Neil Sutherland, *Children in English-Canadian Society* (Toronto & Buffalo: University of Toronto Press, 1976).

social reforms from the outset and continued to over-determine child welfare and adoption practices into the twentieth and twenty-first centuries.⁹

Fears about a lack of accountability in child placements and the loss or “kidnap” of Canadian children “were behind efforts to improve adoption standards and prevent cross-border adoptions.”¹⁰ Similar concerns were expressed within religious and other cultural communities. Many children “rescued” in the first half of the century, came to Canada through the British Home Project as Bernardo children, and gave accounts of mistreatment and cruelty.¹¹ Child-saving also engulfed children who were simply from poor, loving homes, and placed in residential schools in order to “civilize” them according to European ways—through state assimilation policy.¹² The forced removal of children from kin because of poverty, or misappropriation, was experienced as *kidnap*, particularly in First Nations’ communities, and represents the underside to the *voluntary* adoption history described in this dissertation.¹³

⁹ Karen Dubinsky, “Babies Without Borders: Rescue, Kidnap, and the Symbolic Child,” *Journal of Women's History* 19, no. 1 (2007): 142-150.

¹⁰ Nora Lea, “The Protection of Our Children,” *Canadian Welfare* 17, no. 7 (January 1, 1942); Balcom, *The Traffic in Babies*; Patti Phillips, “‘Financially irresponsible and obviously neurotic need not apply’: Social Work, Parental Fitness, and the Production of Adoptive Families in Ontario, 1940-1965,” *Histoire sociale/Social History* 39, no. 78 (2006): 329-358.

¹¹ Lucy Maud Montgomery’s story, *Anne of Green Gables*, depicts one of the most celebrated [international] orphans in Canada and a beloved character in Prince Edward Island. In July 1995 a researcher in Nova Scotia, appeared on the CBC radio and described finding the record of the original Bernardo child on whom the character of Anne was based. The children were named after Dr. Bernardo’s juvenile immigration program in England, by which poor children came to live with or work for Canadian families.

¹² Alvin Finkel, *Social Policy and Practice in Canada: A History* (Waterloo: WLU Press, 2006), 70-76; John Milloy, *A National Crime: The Canadian Government and the Residential School System, 1879-1986* (Winnipeg, University of Manitoba Press, 1999).

¹³ The conflict between kidnap and rescue has received international attention as governments, social, and religious organizations have had to acknowledge and address the impact of forced child removals for First Nations’ communities in Canada, the United States and Australia. Scholars have begun to focus on the connection between domestic child welfare policies and colonialism. Canadian legal

Social historians have described the complex motives and effects of campaigns that linked child-saving with early public health reforms. On the one hand, the period marked a contrast from the previous treatment of dependents where families were solely responsible for their members.¹⁴ But those involved in reform imposed middle-class values as they tackled disparities in infant health.¹⁵ Medical experts exerted considerable influence on social policy and the management of public health reforms (ie. milk, inspections, medical stations).¹⁶ However, the progressive potential of reforms was often undercut because experts still ended up blaming mothers for their “lack of knowledge” rather than address the structural causes of poverty.¹⁷ Contradictions multiplied when it came to the experiences and treatment of poor or unwed mothers, and those who left abusive marriages. Along

scholar Patricia Angus-Monture early on described state-sponsored assimilation strategies, such as residential schooling and child removal, as *cultural genocide*. Patricia Angus-Monture, "A Vicious Circle: Child Welfare and First Nations," in *Thunder in My Soul: A Mohawk Woman Speaks* (Halifax: Fernwood, 1995): 191-215; Suzanne Fournier and Ernie Crey, *Stolen from Our Embrace: The Abduction of First Nations Children and the Restoration of Aboriginal Communities* (Vancouver, Toronto: Douglas & McIntyre, 1998); Bonita Lawrence, "Gender, Race, and the Regulation of Native Identity in Canada and the United States: An Overview," *Hypatia* 18, no. 2 (2003): 3-31; Robert Van Krieken, "The 'Stolen Generations' and Cultural Genocide: The Forced Removal of Australian Indigenous Children from their Families and its Implications for the Sociology of Childhood," *Childhood* 6 (1999): 297-311; Shurlee Swain, "Enshrined Law: Legislative Justification for the Removal of Indigenous and Non-Indigenous Children in Colonial and Post-Colonial Australia," in *Sixteenth Berkshire Conference on the History of Women 2014*, (University of Toronto, Toronto ON, 2014), 24; Christina Firpo and Margaret Jacobs, "Imagined Families: Colonialism, Nationalism, and Child Removals, 1890-1980," Workshop Paper, *Sixteenth Berkshire Conference on the History of Women 2014* (University of Toronto, Toronto ON, 2014), 1-40.

¹⁴ Finkel, *Social Policy and Practice in Canada*.

¹⁵ Wayne E. Carp, *Family Matters: secrecy and disclosure in the history of adoption* (Cambridge, Mass.: Harvard University Press, 1998), 15; See also: Kathryn Arnup, *Education for Motherhood: Advice for Mothers in Twentieth-Century Canada* (Toronto: University of Toronto Press, 1994); Nancy Pottishman Weiss, "Mother, the Invention of Necessity: Dr. Benjamin Spock's Baby and Child Care," Special Issue: Reassessing Twentieth Century Documents, *American Quarterly* 29, no. 5 (Winter 1977): 519-546.

¹⁶ Dianne Dodd, "Advice to Parents: The Blue Books, Helen MacMurchy, MD, and the Federal Department of Health, 1920-1934," *Canadian Bulletin of Medical History* 8 (1991): 203-230.

¹⁷ Finkel, *Social Policy and Practice in Canada*, 74-75; Arnup, *Education for Motherhood*; Weiss, "Mother, the Invention of Necessity," 519-546.

with restrictive labour laws, there were no formal daycare services, and most women could not afford to pay others to care for their children, despite the paradoxical requirement to work and be in the home to nurture children.¹⁸

During the first phase of child welfare reforms, philanthropists focused on physical needs, such as “the prevention of cruelty and neglect, the physical care and nurturance of infants, the feeding of ‘necessitous’ children, school and medical inspections, and the legal position of children,” expressing general concern about the quality of the race.¹⁹ The growth of knowledge-based professions and their interactions with child-savers helped bring about two dominant conceptions of childhood, the “psycho-medical” child and the “welfare-rescue” child, and “the idea of [childhood] as a period marked by vulnerability...requiring protection.”²⁰ While the conditions for some children did improve, child studies scholars have challenged the developmental paradigm on which these universalizing definitions of childhood were based, arguing it reflected Western, middle-class assumptions and ignored wider colonial and global capitalist processes.²¹

Moreover, in practice, children as a social group were never treated equally.

But as Weir has shown, in Canada, the concepts of "child protection" and "child

¹⁸ Finkel, *Social Policy and Practice in Canada*; Margaret J. Hillyard Little, *No car, no radio, no liquor permit: the moral regulation of single mothers in Ontario, 1920-1997* (Toronto, Oxford University Press, 1998); Susan Prentice, “Less, Worse and More Expensive: Childcare in an Era of Deficit Reduction,” *Journal of Canadian Studies/Revue d’études canadiennes* 34, no. 2 (1999): 137-158; Susan Prentice, “Workers, Mothers, Reds: Toronto’s Postwar Daycare Fight,” *Studies in Political Economy* 30 (1989): 115-141.

¹⁹ Hendrick, “Constructions and Reconstructions of British Childhood,” 49.

²⁰ *Ibid.*, 35-59.

²¹ Allison James and Alan Prout, “Introduction,” in *Constructing and Reconstructing Childhood: Contemporary Issues in the Sociological Study of Childhood*, ed. Allison James and Alan Prout, (London, New York and Philadelphia: The Falmer Press, 1990), 1-34; Elizabeth Chin, “Children Out of Bounds in Globalising Times,” *Postcolonial Studies* 6, no. 3 (2003): 309-325; Sharon Stephens, “Editorial Introduction: Children and Nationalism,” *Childhood*, 4, no. 5 (1997): 5-17.

neglect" gained legal force, so that child welfare agencies had broad powers to act on behalf of a new legal subject: the "child in need of protection."²² She suggests we can study the "succession of expert techniques used to find and identify that child" as a new legal subject.²³ Likewise, a number of scholars have shown how statistical techniques allowed officials and experts to locate and evaluate differences within the national population, spurring the age of "professionalism."²⁴

Before the first adoption legislation was enacted in Ontario, the practice of indenturing orphans and transferring guardianship was both a legal and de facto practice.²⁵ The Orphan's Act of 1799 was part of an apprenticing system that was designed to provide "care for homeless waifs" but, in reality, tended to be a form of cheap labour for the individual who took in the child. The later Guardianship Act of 1827 allowed the courts to place child apprentices with a guardian up until the age of 21 for boys and 18 for girls, later modified in 1851 through the "Apprentice and Minor's Act" to allow children "the right to appeal" if they were "mistreated."²⁶

In 1888 the first Child Protection Act was passed in Ontario allowing the courts to place "neglected" children in "industrial homes and refuges," but it also

²² Lorna Weir, *Pregnancy, Risk and Biopolitics: On the Threshold of the Living Subject* (London and New York: Routledge, 2006). See also Ian Hacking, "Symposium Papers, Comments and an Abstract: The Sociology of Knowledge About Child Abuse," *NOÛS* 22, no. 1 (1988) 53-63. For a response to Hacking see Bruno Latour, "Symposium Papers, Comments and an Abstract: The Sociology of Knowledge About Child Abuse," *NOÛS* 22, no. 1 (1988): 67-69.

²³ Lorna Weir, *Pregnancy, Risk and Biopolitics*.

²⁴ Ian Hacking, *Representing and Intervening* (Cambridge, UK: Cambridge University Press, 1983); Allan Irving, "The Scientific Imperative in Canadian Social Work: Social Work and Social Welfare Research in Canada, 1897-1945," *Canadian Social Work Review* 9, no. 1 (1992): 9-27; André Turmel, *A Historical Sociology of Childhood: Developmental Thinking, Categorization and Graphic Visualization* (Cambridge: Cambridge University Press, 2008).

²⁵ Doris Guyatt, "Adoptions in Ontario," *Ontario Association of Children Aid Societies Journal* 10, no.9 (1967): 12 (MTA) CAS fonds 1001.

²⁶ *Ibid.*

“extended the court’s powers to placing children in authorized homes.”²⁷ The later (1893) Act for the Prevention of Cruelty and Better Protection of Children, gave the CAS “broad powers to apprehend neglected children, [including] the power of removing children from their parents and acting as legal guardians of children.”²⁸ The 1893 act gave the CAS the power to supervise wards of the court and paved the way for all future child welfare legislation.²⁹

Through the passing of the act, J.J. Kelso and his American counterpart, Charles Loring Brace of the Children’s Aid Society, challenged the dominant conception of childhood and the child. According to Chen, they helped to introduce the humanist subject, in the figure of the child who was capable of being reformed, taught, and saved, by using gardening metaphors. In so doing, they also advanced a new mode of power that was disciplinary and self-regulatory, in contrast to the punitive treatment of poor children as “waifs.”³⁰ The act normalized state intervention in family life, through prevention, education and rehabilitation strategies, and established the benchmark on which all other acts were formulated.

²⁷ Leonard Rutman and Andrew Jones, *In the Children’s Aid: J.J. Kelso and Child Welfare in Ontario* (Toronto: University of Toronto, 1981): 29-30, cited in Weir, *Pregnancy, Risk and Biopolitics: On the Threshold of the Living Subject*.

²⁸ Weir, *Pregnancy, Risk and Biopolitics*; Jones and Rutman *In the Children’s Aid*.

²⁹ Guyatt, “Adoptions in Ontario,” 12; Martyn Kendrick, *Nobody’s Children: The Foster Care Crisis in Canada* (Toronto: MacMillan, 1990): 79. For a comprehensive overview of laws and regulations leading up to the move to reform “satanic mills” for children and waifs see Carolyn Strange and Tina Loo *Making Good: Law and Moral Regulation in Canada, 1867-1939*, 1997 (Toronto: University of Toronto Press). Gail Aitken, *Criteria of Adoptability in Ontario, 1945-1965: the circumstances, processes and effects of policy changes* (PhD diss., University of Toronto, 1983), 36.

³⁰ Xiaobei Chen, “Cultivating Children as You Would Valuable Plants: The Gardening Governmentality of Child Saving, Toronto, Canada, 1880s-1920s,” *Journal of Historical Sociology* 16, no. 4 (December 2003): 463-471.

Interventions in the name of new problems of the “social” were increasingly tied to the work of “knowing the poor,” which became its own form of science.³¹ The science of social reform drew on the competing discourses of hereditarianism and humanism, as reformers debated the malleability of human subjects.³² By defining pauperism as a hereditary problem and a disease to be eliminated, Kelso justified the power of the CAS to investigate the lives of the poor; insofar as, the meaning of heredity was not fixed.³³ Investigation was supplemented by liberal strategies of supervision, education, and guidance, based on the humanist belief that within a proper environment, individuals could be reformed.³⁴

In 1910, Kelso reported a growth in the number of unwed mothers and the abuse of illegitimate children. He and Charlotte Whitton began to pressure the government to eliminate the practices of indenturing and institutionalizing children, and increase funding for foster home care. In its initial form, foster mothers took unwed mothers into their homes to help with housework and teach them how to be “proper” mothers.³⁵ But in addition, that same year (1910), seventy-two Ontario Children’s Aid Societies without trained staff were given the authority to “administer the Children’s Protection Act, and to place children from maternity homes in adoption homes.”³⁶

³¹ Mariana Valverde, *The Age of Light, Soap and Water: Moral Reform in English Canada, 1885-1925* (Toronto: McClelland & Stewart, 1991), 15; Hacking, *Representing and Intervening*.

³² Chen, “Cultivating Children,” 460-86.

³³ Kendrick, *Nobody’s Children*, 79-81.

³⁴ Chen, “Cultivating Children,” 463; Turmel, *A Historical Sociology of Childhood*, 13-14; Valverde describes the contradictory logic within missionary work in *The Age of Light, Soap, and Water*.

³⁵ Ontario Association of Children’s Aid Societies’ historical records. (AO) F819 MU 5087 Files, RG 29-01 Ontario.

³⁶ Aitken, *Criteria of Adoptability in Ontario*, 37.

The legal recognition of adoption in Canada was supposed to mitigate the tragedies associated with the “vestiges of the indenture system” where, as one social worker acknowledged, applicants for children could “inspect and choose ‘after the manner of a cattle fair except no price was demanded.’”³⁷ Although the explicit commercialization of children was considered repugnant to adoption reformers, Swain agrees with Herman that the “laissez-faire...market logic” of the period meant that some forms of indenture practice still operated informally through adoption placements, long after the formal indenture model was condemned.³⁸ Some commentators believe that fostering only caught on because it was more economically viable than funding orphan asylums, not because governments were convinced by experts that it was better for children.³⁹

One of the paradoxes, pointed to by social historian John Bullen, was that the early child-savers, particularly the CAS, contributed to the contradictory treatment of children. The CAS held strong moral beliefs about the need to foster industriousness and a work ethic in “rescued” children, and these ideas influenced their placement decisions.⁴⁰ Social workers admitted that although the original idea of foster care was to “try out” placements and provide the “advantage of belonging

³⁷ Mary Fairweather, “Adoption Institute,” (1952): 5 (MTA) CAS and Infants Homes fonds 1404.

³⁸ See for instance Shurlee Swain, “Market Forces: Defining the Adoptable Child, 1860-1940.” *Social Policy & Society* 11, no. 3 (Cambridge University Press 2012): 15. Ellen Herman, “The Paradoxical Rationalization of Modern Adoption,” *Journal of Social History* 36, no. 2 (2002b): 339-385. Carp, *Family Matters*. As I will demonstrate in the thesis, statements by the Ontario Premier reflect the fact that market logic persisted during the postwar period, in various forms (such as matching practices, exclusions of “kinds” of children, expectations of parents, and the “costs” of particular individuals to welfare programs).

³⁹ Kendrick, *Nobody's Children*, 81.

⁴⁰ John Bullen, “J.J. Kelso and the ‘New’ Child-Savers: The Genesis of the Children’s Aid Movement in Ontario,” *Ontario History* 82, no. 2 (June 1990): 107-128.

to a family,” it was difficult to put into practice and many children were returned to the agency.⁴¹ In addition, although reformers lobbied successfully for mandatory schooling and child labour laws, in the immediate short term, they created added financial burdens for poor and working-class families.⁴²

Debates about apprenticing and adoption illustrate the changing symbolic value of children at the turn of the century, and the rise of a middle-class culture and “cult of domesticity.”⁴³ Vivian Zelizer described a cultural shift away from the “economically *useful*” older child of the nineteenth century, toward the “emotionally priceless” but economically useless infant of the early twentieth century.⁴⁴ Previously, *older* children were considered more socially valuable because of their economic contribution to the family household. Zelizer says it was not uncommon for parents to register “wrongful-birth” claims against doctors, who failed to inform them about a pending arrival because it was another mouth to feed. Already hard-pressed families were reluctant to take in and adopt an infant rather than an older child who could work and contribute to the family economy.

Suzanne Morton’s account of the Halifax explosion of 1917 and subsequent adoption campaign illustrates how conventional understandings of childhood and

⁴¹ Mary Speers, “The School-Aged Child,” (1954): 1. (MTA) CAS fonds, Box 115.

⁴² John Bullen, “Hidden Workers: Child Labour and the Family Economy in Late-Nineteenth-Century Urban Ontario,” in *Canadian Family History*, ed. Bettina Bradbury (Toronto: Copp Clark Pittman, 1992), 199-212.

⁴³ Blumin provides a fascinating social history of the formation of a distinct middle-class culture in North America, in the 19th Century. See, Stuart M. Blumin, *The Emergence of the Middle Class: Social Experience in the American City, 1760-1900* (New York: Cambridge University Press, 1994 [1989]): 138-239. For a discussion of the symbolic significance of the child and the significance of race discourse see: Caroline F. Levandar, *Cradle of Liberty: Race, the Child, and National Belonging from Thomas Jefferson to W.E.B. Du Bois* (Durham & London: Duke University Press, 2006).

⁴⁴ Vivian Zelizer, *Pricing the Priceless Child: The Changing Social Value of Children* (New York: Basic Books, 1985).

parental expectations of children were shaped by specific historical and material conditions. After the event, attempts were made to find homes for children who were orphaned by the fire.⁴⁵ Many of the adults who applied to adopt were straightforward about their motivations to adopt and their social circumstances. Rural and working-class families did not see any contradiction between expressing a need for help around the house or farm, and the desire to provide a home and family to a needy child. Their views were not exceptional. Across Canada, the meaning of childhood was not universal. Many children continued to work and their experiences within families varied dramatically by class, race, gender and region.⁴⁶

During the same decade, social reformers in Ontario contributed to a moral panic about alleged increases in illegitimacy rates, sexual misconduct and family breakdown. Unregulated adoptions and the condition of children in institutions came under public “scrutiny” prompting calls for greater legislation and regulation of child-placers.⁴⁷ A number of government and professional organizations became devoted to standardization and professionalization and two leading influences in North America were the United States Children’s Bureau (USCB) and the Child Welfare League of America (CWLA).⁴⁸ The Canadian Welfare Council (CWC) was the nearest Canadian equivalent and a registered member of the CWLA, though,

⁴⁵ Suzanne Morton, “To Take an Orphan: Gender and Family roles Following the 1917 Halifax Explosion,” in *Gendered Pasts: Historical Essays in Femininity and Masculinity in Canada*, ed. Kathryn McPherson, Cecilia Morgan, and Nancy M. Forestell (Toronto: Oxford University Press, 1999), 107-122.

⁴⁶ Joy Parr, *Childhood and Family in Canadian History* (Toronto: McLelland & Stewart, 1982), 7-16; Bullen, “Hidden Workers,” 199-219; Boyden, “Childhood and the Policy Makers,” 184- 215.

⁴⁷ Murray, “Governing ‘Unwed Mothers’ in Toronto,” 266.

⁴⁸ Carp, *Family*, 1998; Herman, “The Paradoxical Rationalization,” 339-385.

according to Balcom, as a voluntary organization the CWC had no enforcement power.⁴⁹

The Children's Aid Society and Infants' Home of Toronto was the largest agency in Canada, and strongly influenced the development of national welfare and adoption policy. Members of the agency were instrumental in founding the Ontario Association of Children's Aid Societies (OACAS) in 1912, which formed to deal with the "inconsistency of government support for child welfare" and played an "important role in strengthening child welfare legislation, practice and administration."⁵⁰ The association became increasingly important because of differences within the profession, implicitly recognizing there was no sense of occupational unity and shared professional identity.⁵¹

Over the next forty years the semi-private CAS' received greater legislative authority to act on behalf of the Ontario government in managing the province's public adoption system. While the state was "answerable" for the child's legal status, the CAS was responsible for "implementing" the legislation.⁵² By the 1930s every province had a Children's Protection Act and by the mid-1940s only two provinces

⁴⁹ Balcom, *The Traffic in Babies*.

⁵⁰ John McCullagh, *A Legacy of Caring: A History of the Children's Aid Society of Toronto* (Toronto & Oxford: Dundurn Press, 2002), 59. See also Marion McBride, *The Ontario Association of Children's Aid Societies: 1945-1965* (PhD diss, University of Toronto, 1993). The OACAS had its own professional journal.

⁵¹ Strauss and Bucher, "Professions in Process," 16-17.

⁵² Gail Aitken, "Critical Compromises in Ontario's Child Welfare Policy," in Jacqueline S. Ismael, ed., *The Canadian Welfare State: Evolution and Transition*, (Alberta: University of Alberta Press, 1987), 276.

(Alberta and Quebec) did not have Children Aid Societies empowered to act as guardians for children who had been removed from their parents.⁵³

Constructions of Unmarried Motherhood in Early Adoption Discourse

While the symbolic view of children born “out of wedlock” may have changed in the early twentieth century, it did not necessarily extend to unwed mothers. They were portrayed as “sinners” and “scroungers,” “victims” or “villains,” and divided into those deserving and undeserving of welfare services.⁵⁴ Garber argues that ideas about women’s sexuality were connected to women’s changing status in society, and never-married mothers, unlike their male partners, were “accused of promiscuity, immorality, failure to resist advances, and carelessness for bringing a child into the world,” because of the stigma or they could ill-afford to.⁵⁵ The sexual “immorality” of unwed mothers, not fathers, was lumped together with other kinds of “devian[cy]” that came to symbolize the “breakdown of the family,” a political mantra that gained considerable traction over the century.⁵⁶ Mothers constructed as victims could be rehabilitated, whereas those “believed to be

⁵³ Balcom, *The Traffic in Babies*, 135-136.

⁵⁴ Pat Thane, “Unmarried Motherhood in Twentieth-Century England,” *Women’s History Review* 20, no. 1 (2011); Lewis & Welshman, “The Issue of Never-Married Motherhood,” 401-418; Little, *No car, no radio, no liquor permit*.

⁵⁵ Ralph Garber, *Disclosure of Adoption Information* (Toronto: Ministry of Community and Social Services, 1985), 12.

⁵⁶ Dorothy Chunn and Shelley A. M. Gavigan, “From Welfare Fraud to Welfare as Fraud: The Criminalization of Poverty,” in *Criminalizing Women* ed. E. C. G. Balfour (Halifax, Fernwood Publishing, 2006), 217-235. Dorothy Chunn and Shelley A. M. Gavigan, “From Mother’s Allowance to Mothers Need Not Apply: Canadian Welfare Law as Liberal and Neo-Liberal Reforms,” *Osgoode Hall Law Journal* 45, no. 4 (2007): 733-771.

subnormal and a threat to the nation's health" were treated more punitively.⁵⁷ In the first decades of the century, reformers made links between a perceived growth in illegitimacy rates and the high rates of infant mortality, so that "institutional care arrangements and unregulated adoptions came under intense scrutiny for their detrimental effects on child health and welfare."⁵⁸

Relatively recently, the activities and position of women within early reform movements have been the subject of critical feminist work. Valverde for one has argued that voluntary organizations, largely comprising white, middle-class women, were often more interested than the State in nation-building, and the family was central to their work.⁵⁹ Early social workers and progressive maternalists fought for legislation (such as child support and mother's pensions) to shore up the family wage, which Ursel described as the shift from familial to social and/or state patriarchy.⁶⁰ What is more, reformers and welfare advocates drew on public health discourse helping to "strengthen the two-parent, heterosexual, patriarchal" family, one that was implicitly British Anglo-Saxon, and Protestant.⁶¹

The links between British imperialism and "racial motherhood" were strengthened in the nineteenth and early twentieth century in most western nations.⁶²

⁵⁷ Lewis & Welshman, "The Issue of Never-Married Motherhood," 417.

⁵⁸ Murray, "Governing 'Unwed Mothers' in Toronto," 266.

⁵⁹ Valverde, *The Age of Light, Soap and Water*. Annalee Gözl, "Family Matters: The Canadian Family and the State in the Postwar Period," *Left History* 1, no. 2 (1993): 8-49. Gözl describes how the link between citizenship and an idealized Canadian genealogy came together during the postwar period.

⁶⁰ Jane Ursel, *Private Lives, Public Policy: 100 Years of State Intervention in the Family* (Toronto, Women's Press: 1992), 27-43.

⁶¹ Murray, "Governing 'Unwed Mothers'," 219-232.

⁶² Anna Davin, "Imperialism and Motherhood," *History Workshop Journal* 5, (1978): 9-65. Ann Laura Stoler, *Race and the Education of Desire: Foucault's History of Sexuality and the Colonial*

In Canada, the promotion of particular forms of motherhood was driven by a need to reproduce the nation as a British society, also reinforced through immigration laws.⁶³ Many of the values of the early “mothers of social welfare” were built on the assumption that “the nation was the home and the home was the women; all were best British.”⁶⁴ Increased immigration from non-British countries, an industrial class structure, changing gender relations, and declining birth rates (for some social groups) were linked as social threats to the family and national culture.⁶⁵ Fears about declining birth rates were coupled with internal threats to domestic reproduction because of over-population by the “underclasses.”⁶⁶

The irony, and what eventually fueled the birth control movement, is that because contraception was illegal under the criminal code, unwanted pregnancies were all but guaranteed. Women with means entered private maternity homes where abortions could be performed and adoptions completed.⁶⁷ Abortions were dangerous and/or harder to obtain for working-class women who could not afford them, and

Order of Things (Durham and London: Duke University Press, 1995), 35. Ann Laura Stoler, “Making Empire Respectable: The Politics of Race and Sexual Morality in Twentieth-Century Colonial Cultures,” in *Situated Lives: Gender and Culture in Everyday Life*, ed. H. L. Louise Lamphere and Patricia Zavella (New York & London: Routledge, 1997), 373-399. Mariana Valverde, “‘When the Mother of the Race is Free’: Race, Reproduction, and Sexuality in First-Wave Feminism,” in *Gender Conflicts*, ed. Franca Iacovetta and Mariana Valverde, (Toronto: University of Toronto Press, 1992), 3-26.

⁶³ Ena Dua, “Beyond Diversity: Exploring the Ways in Which the Discourse of Race has Shaped the Institution of the Nuclear Family,” in *Scratching the Surface*, ed. Ena Dua and Angela Robertson (Toronto, Women's Press, 1999), 237-259; Lisa Marie Jakubowski, *Immigration and the Legalization of Racism*. Halifax: Fernwood Publishing, 1997.

⁶⁴ Barbara Roberts, “A Work of Empire: Canadian Reformers and British Female Immigration,” in *A Not Unreasonable Claim: Women in Reform in Canada, 1880s-1920s*, ed. Linda Kealey (Toronto: Women's Press, 1979), 201.

⁶⁵ Dua, “Beyond Diversity,” 237-259; Jakubowski, *Immigration and the Legalization of Racism*, np.

⁶⁶ *Ibid.*

⁶⁷ Veronica Strong-Boag, “Introduction to André Lévesque: ‘Deviant Anonymous: Single Mothers at the Hôpital de la Misericorde in Montreal, 1929-1939,’” in *Rethinking Canada: The Promise of Women's History*, ed. Veronica Strong-Boag and Anita Clair Fellman (Toronto: Copp-Clark Pitman, 1991), 322.

many women died because of botched abortions or those conducted in unsanitary, unsafe conditions.⁶⁸ The alternative for poor women was to enter a religious or state-sponsored maternity home where a boarding fee was charged, though the majority were moralistic and pressured women to keep their children.

Many of the early maternity homes had been established by female philanthropists, whose stated purpose was the prevention of “baby-farming and protecting children,” taking in on occasion, well-behaved “unwed mothers” who were expected to participate through wet-nursing.⁶⁹ But, as observers have noted, female maternity home workers also helped to constitute the category of “unwed mothers as a distinct social classification...laden with assumptions of race, class, gender, and other social divisions,” justifying the increased regulation of women because of their perceived need for reform.⁷⁰ The assumed similarity of experience based on gender worked to both obscure and sharpen the differences among and between women, as both clients and providers.

Historians point out the difficulty of getting accurate statistics on the number of unmarried mothers who kept and raised their children, noting that unmarried mothers usually only became visible if they could not financially support themselves and required public relief.⁷¹ Many women remained out of view because they were

⁶⁸ Arlene Tiger and Angus MacLaren. *The Bedroom and the State* (Toronto: McLelland & Stewart, 1986).

⁶⁹ Karen Murray, "Governing 'Unwed Mothers' in Toronto," 265.

⁷⁰ Murray, "Governing 'Unwed Mothers' in Toronto," 265. See also Lévesque: "Deviants Anonymous: Single Mothers," 324-336; Leigh Valliere, "Continuity in the Face of Change: Institutions for unwed mothers in Toronto, 1870s-1930s," (Unpublished MRP, York University, 1993).

⁷¹ Thane, "Unmarried Motherhood," 11-29.

supported by their families, or could support themselves.⁷² Some mothers boarded with foster mothers, working as live-in domestics, or left their children with them, reclaiming them later when they either remarried or had adequate means.⁷³

I found similar evidence to support the finding that the women who typically approached agencies had limited choices available to them, in the Toronto Welfare Council's unpublished report of a study of children born to unwed mothers living in Toronto in 1925-26.⁷⁴ The authors acknowledged the difficulty of obtaining accurate information about unwed mothers and children. In nineteenth century Canada, as in Britain, the Poor Law refused "out relief" to single mothers, which some historians believe fostered the practice of infanticide.⁷⁵ The view of some scholars is that policy reformers were more concerned about the health of the illegitimate child rather than their unmarried mothers, whose care was left to the discretion of religious and other voluntary organizations.⁷⁶

⁷² Patti Phillips, *Blood Not Thicker Than Water: Adoption and Nation-Building in the Postwar Baby Boom*. (master's thesis, Queen's University, 1995). Previous oral testimony and records obtained from an adoption worker in an Eastern Ontario CAS indicated there were variations in living arrangements. For example, one mother continued to send money to the agency involved because her child was not adopted. See also: Valliere, *Continuity in the Face of Change*; Lewis and Welshman, "The Issue of Never-Married Motherhood," 401-418; Thane, "Unmarried Motherhood," 11-29; Maria Luddy, "Unmarried Mothers in Ireland, 1880-1973," *Women's History Review* 20, no. 1 (2011): 109-126.

⁷³ "A Study of the Adjustment of Unmarried Mothers," conducted by the Toronto Welfare Council (TWC) 1943 (MTA) CAS fonds 1001, Series 537; Thane, "Unmarried Motherhood," 16.

⁷⁴ "A Study of the Adjustment of Unmarried Mothers," (TWC). I call it an unpublished study because it is not part of the open access files in the Toronto archives; however, when it was originally written, it circulated between Canadian and U.S. welfare agencies.

⁷⁵ Murray, "Governing 'Unwed Mothers' in Toronto," 253-276. Herman, "The Paradoxical Rationalization," 339. Valliere, *Continuity in the Face of Change*, 1993; McCullagh, *A Legacy of Caring*.

⁷⁶ Lewis and Welshman, "The Issue of Never-Married Motherhood," 401-418; Little, *No car, no radio, no liquor permit*.

The Toronto Infants' Home was founded by one such group of prominent female philanthropists in 1875 and established to care for homeless infants and mothers, mostly wet nurses and working parents.⁷⁷ As Carol Baines observed, while the goal of many organizations may have begun as evangelization, coming “face to face” with the needs of working-class women and their children awakened a feminine political consciousness and led to widespread campaigns for increased social services.⁷⁸ Nevertheless, she says, the image of the “Lady Bountiful” still had to be overcome.⁷⁹

The choices for poor unwed mothers even once they came in contact with organizations were limited and mother's pensions were not available to them. They either returned home to family, married the father of the child, were taken back by their employer with child, boarded with the child in a non-profit or for profit boarding home, (sometimes working within the home) or left the child to board alone, sending payments until they could claim the child later.⁸⁰ Although some mothers successfully pursued paternity payments, they were generally harder to obtain and maintain.⁸¹

Mothers with no alternative but to board in private boarding homes faced additional risks. The use of wet-nurses in for-profit maternity homes, or “baby-

⁷⁷ “A History of the Infants' Homes of Toronto,” 1 (MTA) fonds 1404. The Home was relocated when demand increased, and managers began to work more closely with the Children's Aid Society of Toronto, which had responsibility for children over the age of 4 as well as all adoptions.

⁷⁸ Carol Baines, “The Professions and the Ethic of Care,” in *Women's Caring: Feminist Perspectives on Social Welfare*, ed. Patricia Evans, Carol Baines, and Sheila Neysmith (Toronto: McClelland and Stewart, 1991), 40-43.

⁷⁹ Baines, “The Professions and the Ethic of Care,” 41-43.

⁸⁰ “A Study of the Adjustment of Unmarried Mothers,” (TWC); Lévesque: “Deviant Anonymous: Single Mothers,” 322.

⁸¹ “A Study of the Adjustment of Unmarried Mothers,” (TWC).

farms,” had been linked to child deaths from malnourishment.⁸² One of the more notorious Canadian cases in the 1930s was linked to the Ideal Maternity Home in Chester, Nova Scotia, which flourished during the depression. One of the revelations was that the owners essentially “kidnapped” healthy adoptable children, telling mothers who boarded there that their children had died. Other children, who were voluntarily relinquished for adoption but deemed unadoptable by the proprietors, were fed water and molasses until they slowly starved to death--memorialized as the “butterbox babies.”⁸³ Many of the children who died were “mixed-race,” confirming popular and professional fears that boarding homes run for profit were run by the same “unscrupulous” individuals that adoption reformers warned mothers about.⁸⁴

Although a number of regulations were introduced across Canada, insecure funding remained a theme in the provision of maternal and child welfare services. The Ontario government had passed the Maternity Boarding Houses Act in 1912 to regulate maternity homes, and the act called for the registration of all births, the increased presence of the CAS’ in adoptions, and banned the exchange of money in adoptions. Soon after, the first adoption legislation in Ontario was introduced in 1921 giving the CAS legal authority “to investigate each adoption application and

⁸² Valliere, *Continuity in the Face of Change*.

⁸³ Bette Cahill, *The Butterbox Babies: New Revelations 15 Years Later*. Halifax: Fernwood Publishing, 2006 [1992]. There is a monument to the infants in Chester, Nova Scotia.

⁸⁴ Balcom, *The Traffic In Babies*. Phillips, “*Blood Not Thicker Than Water*”; Stuart Jaffary, “Welfare in Alberta,” *Canadian Welfare* (Oct. 15, 1948). Jaffary, a professor of social work at the University of Toronto, outlined abuses by the Alberta government, as a result of cost-cutting measures, involving cross-border adoptions. The final Report, written by Charlotte Whitton, sparked controversy and led to changes in social work and adoption policy in Alberta and other provinces.

report to the provincial officer.”⁸⁵ In 1927, the Charitable Institutions Act expanded to include maternity homes and by 1930 the Department of Public Welfare was established to administer welfare legislation. Together, through the cooperation of fifty-eight Children’s Aid Societies and thirty-six children’s institutions, with a mixture of public and private funding, they were supposed to provide “custodial care for dependent children.”⁸⁶

Legal Adoption and Professional Ambivalence

Before the first adoption act was passed most adoptions were “treated as contracts, written or verbal.”⁸⁷ After the act was passed in Ontario in 1921, 2000 adoptions were legalized in the first two years, revealing the abundance of *de facto* adoptions. However, reform efforts did not immediately translate into adoptions by trained professionals, which were still considered rare in the 1920s.

The framework used to determine the rights of mothers and children was strongly modelled after individual private property rights.⁸⁸ The new act gave the child and adoptive parents legal rights, and the child claims to the estate, but it was also significant for ushering in the cultural shift toward the “emotionally priceless” child. *Emotional security*, education, maintenance, and *affection* were now

⁸⁵ Mary Speers, “The School Aged Child,” 1 (MTA) CAS fonds 1001; Guyatt, “Adoptions in Ontario,” 12.

⁸⁶ Peter Turner, *Operational Review: Children and Youth Institutions*. Final Report (Toronto: Government of Ontario. Ministry of Community and Social Services, 1979), 13.

⁸⁷ Guyatt, “Adoptions in Ontario,” 12.

⁸⁸ Rosalind Pollack Petchesky, “The Body as Property: A Feminist Re-vision,” in *Conceiving the New World Order: The Global Politics of Reproduction*, ed. Faye D. Ginsburg and Rayna Rapp (University of California Press: Berkeley, Los Angeles, London, 1995), 387-406. Petchesky argues that commercial ideas about property differ from feminists’ strategic uses of the body as property and “self-propriety.”

enshrined in legal language that entitled adopted children to the same provisions as a “natural child.”⁸⁹ The adoption act, at least officially, reflected growing concern for the rising number of children living in institutions; however, in practice, reformers placed many obstacles in the way and adoption was still riddled with suspicion and fear.⁹⁰

Interpretations differ over whether parents or social workers were more reluctant to embrace adoption. Historian Wayne Carp contends it was hard to change “the cultural definition of kinship” and social workers had to work hard to convince parents it was safe and “natural” to bring a biological stranger into the family.⁹¹ In contrast, cultural anthropologist Marilyn Strathern argues that the primacy of the bio-genealogical basis of kinship was a relatively recent phenomenon and one shaped by class.⁹² Moreover, the available historical research on adoption is contradictory.

Social workers advocated for the [natural] family stressing “the cultural primacy of the blood bond in family kinship.”⁹³ The strategy was to not break up families because of poverty, which is why some states and provinces passed “mother’s pension laws,” and what Carp believes contributed to the low number of

⁸⁹ Guyatt, “Adoptions in Ontario,” 12-13. The Adoption Act was amended in 1955, becoming part of the Child Welfare Act, and once again in 1965 to include “the best protection for both adopted parents and their adopted children.”

⁹⁰ Guyatt, “Adoptions in Ontario,” 12.

⁹¹ Carp, *Family Matters*, 17; Phillips, “Blood Not Thicker.”

⁹² See Marilyn Strathern, *Kinship, Law and the Unexpected: Relatives are Always a Surprise* (Cambridge, Cambridge University Press, 2005); Veronica Strong-Boag, *Fostering Nation? Canada Confronts Its History of Childhood Disadvantage* (Waterloo: WLU Press, 2011).

⁹³ Carp, *Family Matters*, 16.

adoptions.⁹⁴ Yet, the introduction of mother's pensions is not sufficient for explaining the low number of adoptions. The fight for pensions did not include unmarried women in Canada or the United States, and unwed mothers in Ontario were excluded from receiving Ontario Mother's Allowance benefits until 1959.⁹⁵ The reluctance to support them is even more puzzling when coupled with the fact that social workers and maternity home workers were reluctant to support adoption.

Many social workers treated adoption as a choice of last resort and "made it a point of pride that they rarely recommended that children be adopted" as long as there was an able-bodied parent or relative.⁹⁶ The managers of Humewood House, a Toronto maternity home, were happy to record only a few "special cases," even though, as Murray says, their statements were contradicted by a 1920 study of children born to unwed mothers in hospitals and maternity homes.⁹⁷ That study revealed that only one-fifth of the children remained with their mothers after six months, due to a lack of support and social services, and the prevailing stigma of illegitimacy.

⁹⁴ Margaret Little, "The Blurring of Boundaries: Private and Public Welfare for Single Mothers in Ontario," *Studies in Political Economy* 47, Summer (1995): 89-109. Little's history of Ontario Mother's Allowance (OMA) revealed that in the second half of the 20th century, welfare workers used the threat of adoption to regulate all mothers receiving social assistance.

⁹⁵ Finkel, *Social Policy and Practice in Canada*; Murray, "Governing 'Unwed Mothers' in Toronto," 253-276; Nancy Fraser and Linda Gordon, "A Genealogy of Dependency: Tracing a Keyword of the U.S. Welfare State," *Signs: Journal of Women in Culture and Society* 19, no.2 (Winter 1994): 309-336. State and/or social support was historically tied to wage labour and demands for the family wage, which by its own logic, excluded entitlements for single women and/or mothers.

⁹⁶ Carp, *Family Matters*, 17. However as will be shown in later sections there were concurrent debates about what should be done with "sub-normal" children and their feeble-minded mothers; proposals included sterilization and institutionalization. It is also worth noting the contradiction; the same arguments were *not* made for keeping first nations' children together with extended family members when children were removed in cases of neglect.

⁹⁷ Murray, "Governing 'Unwed Mothers' in Toronto," 265.

I found evidence of an anti-adoption bias, during the 1920s, in the records of The Toronto Infants' Home and a (1943) study conducted by the Toronto Welfare Council (TWC).⁹⁸ The study is one of few available sources from the period, and stands out because it was commissioned by two leading U.S. research universities and described as one of the most important and influential studies at the time. The policies and practices described in the report reveal the crosscutting influence of moral reform and public health discourse. Social workers in the 1920s subscribed to gender ideologies that reinforced the normative assumption that women were responsible for maintaining the sexual order. They described children as a “stabilizing influence” in mothers’ lives and used blanket procedures with all mothers who came to agencies;

They have said that babies develop more normally if nursed, and [agencies] have refused assistance if the mothers were unwilling to comply with their rulings. Knowing that all babies are *not good prospects for adoption* and fearing the overburdening of foster homes and expenses to the community, the agencies have insisted upon mothers staying with their children, hoping that the affection [that] would be stimulated during the period of care would result in the mothers finding a means of keeping their children.⁹⁹

Some Toronto agencies had a policy of insisting that mothers keep their children, or at least stay with them for the first few months. They believed that mothers who kept their babies learned to conform to social norms by being parents. Mothers who took

⁹⁸ “A Study of the Adjustment of Unmarried Mothers,” (TWC); Sally Sales, *Adoption, Family and the Paradox of Origins: A Foucauldian History* (London, New York: Palgrave, MacMillan, 2012). Sales describes a similar anti-adoption bias in the United Kingdom.

⁹⁹ “A Study of the Adjustment of Unmarried Mothers,” (TWC) 4. [emphasis added]

children home “were willing to sacrifice some of their own pleasures in the interests of their children’s welfare.”¹⁰⁰

The initial rehabilitative work of the Infants’ Home was geared to helping women keep their children by boarding them with foster mothers, and “teaching” by example how to create a “real” home and to “stimulate love and interest in her baby.”¹⁰¹ Although the report stated that most of the women coming to the home felt “definite” that they wanted to pursue adoption as a solution, the workers reframed the issue in moral terms, calling it a case of women wanting to “be relieved of their responsibility.”¹⁰² The guidance of patient workers was supposed to sort out those women who were willing to “sacrifice themselves in order to keep their children with them,” and those who would not.¹⁰³ The dominant ideology of motherhood in the early twentieth century portrayed ideal mothers as *always* prepared to sacrifice; when they could or would not, because of poverty or other circumstances, they were viewed as pathological--though this too was qualified.¹⁰⁴

According to the records, about 45% of working-class girls who came to the home kept their babies, returning home to either live with family or marry. By comparison girls from the “higher class home” (e.g. those with a university education) were described as generally not as willing to “make the sacrifice” and

¹⁰⁰ Ibid.

¹⁰¹ “Better Care for The Unmarried Mother: How Can We Get it?” (OACAS) 1925 (AO) F819, Box 16 MU5087.

¹⁰² Ibid.

¹⁰³ “A Study of the Adjustment of Unmarried Mothers,” (TWC): 4.

¹⁰⁴ Marlee Kline, “Complicating the Ideology of Motherhood: Child Welfare Law and First Nation Women,” *Queen’s Law Journal* 18 (1993): 306-342; Lawrence, “Gender, Race, and Regulation,” 3-31; Monture-Angus, “A Vicious Circle,” 191-215.

only about 10% kept their infants.¹⁰⁵ Social workers admitted they only considered adoption when they had a great deal of knowledge about the child's background, not wanting to "spoil a home by putting a wrong child into it."¹⁰⁶ Thus, it appeared that adoption placements were recommended more readily for girls from "better" backgrounds. Although some social workers acknowledged the need to improve social conditions for all unmarried mothers, and agreed women should not be made to face the burden of alone, in the short term, their goals were limited to restoring [unwed mothers] "self-respect" and providing a positive outlook.¹⁰⁷

The strategies taken with birthmothers did not routinely include adoption planning; instead, agencies encouraged mothers to breastfeed in order to promote the child's health, hoping to develop an emotional and physical bond between mother and child. Social workers were supposed to instill an absent mothering impulse in unwed mothers, rooted in the "blood bond."¹⁰⁸ Well into the early 1930s, the director of the Child Welfare League of America, the foremost authority on adoption standards first introduced in 1938, still boasted about how few adoptions were being arranged by professionals and that "no national list" of agencies yet existed.¹⁰⁹

Despite these efforts, over half of single mothers who came to Toronto agencies did not keep their infants. In 1925, 300 of the 725 children born out of wedlock in Toronto remained with their mothers "in Toronto for at least a few

¹⁰⁵ I retain the term "girls" through this section and parts of the thesis, where it appeared in the records, because it helps to capture the impressions of social workers and their position relative to young women who were often infantilized.

¹⁰⁶ "Better Care for The Unmarried Mother," (OACAS) 1925.

¹⁰⁷ Ibid.

¹⁰⁸ Herman, "The Paradoxical Rationalization," 345.

¹⁰⁹ Ibid., 346.

months after birth,” but 425 did not.¹¹⁰ The Social Service Index included information from registered agencies about the 300 children who remained with their mothers, at least initially. The records indicated that “194 had left the City...been placed for adoption, died, or...been made wards of the Children’s Aid Society.”¹¹¹ Clearly, women tried to work around formal and informal rehabilitation strategies to the degree that they could, while still enlisting services when they needed them. What remains to be demonstrated is how a segment of social workers, or small core of adoption advocates, began to redefine the mission and work of the profession, to construct a professional identity.

The Science of Heredity and its Influence in Adoption Social Work

Moral welfare discourse was not the only thing that contributed to an anti-adoption bias. As products of their time, many social workers did not support adoptions because they believed these infants would contaminate the gene pool. It was a view shared by prominent U.S. eugenicists Henry Herbert Goddard and Ida Parker, who did research for the Council of Social Agencies in Boston, as well as Canadian reformers Charlotte Whitton and Dr. Helen MacMurchy.¹¹² Parker linked mental deficiency and immortality to the backgrounds of children in adoptions between 1922-1925.¹¹³

¹¹⁰ “A Study of the Adjustment of Unmarried Mothers,” Council (TWC) 1943: 3.

¹¹¹ Ibid.

¹¹² Herman, “The Paradoxical Rationalization,” 342; Patricia T. Rooke and R. L. Schnell, *No Bleeding Heart: Charlotte Whitton A Feminist on the Right* (Vancouver: University of British Columbia, 1987), 22-26; 69.

¹¹³ Herman, “The Paradoxical Rationalization,” 342.

In the first half of the century governments tried to address threats to national health and competition from within and without through eugenic and immigration policies and this nation-building imperative encompassed adoption policy. In the United States, Canada, and internationally there was a general feeling that mental defectives—the feeble-minded—were outbreeding the mentally “fit.”¹¹⁴ A proliferation of visual representations of “sub-normal” bodies in the population aided by a variety of surveillance tools such as census data, medical catalogues, intelligence testing, and quantitative data was used to provide “factual” evidence of the rising numbers of “idiots” in European and North American society, the objective of which was to justify a number of negative eugenic measures.¹¹⁵ Pedigree charts were used by leading experts such as Charles Davenport, who gave advice focused on breeding out the “unfit” using coercive measures such as “immigration and sterilization.”¹¹⁶

According to Snyder and Mitchell, it was not because cognitive capacities diminished that a “subnormal nation” emerged between 1890-1930s, but because of the wide-scale application of a diagnostic regime of defective intelligence and the

¹¹⁴ John P. Park and Deborah C. Radford, "From the Case Files: Reconstructing a History of Involuntary Sterilization," *Disability and Society* 13, no. 3 (1998): 318; Daniel J. Kevles, *In the Name of Eugenics: Genetics and the Uses of Human Heredity* (Cambridge, Massachusetts & London, England: Harvard University Press, 1999); Nancy Stepan, "Biological Degeneration: Races and Proper Places," in *Degeneration: The Dark Side of Progress*, ed., J. Edward Chamberlin and Sander L. Gilman. (New York: Columbia University Press, 1985), 97-120.

¹¹⁵ Sharon L. Snyder and David T. Mitchell, "Out of the Ashes of Eugenics: Diagnostic Regimes in the United States and the Making of a Disability Minority," *Patterns of Prejudice* 36, no. 1 (2002): 83.

¹¹⁶ Molly Ladd-Taylor, "A Kind of Genetic Social Work: Sheldon Reed and the Origins of Genetic Counselling," in *Women, Health, and Nation: Canada and the United States since 1945*, ed., Georgina Feldberg, Alison Li, and Kathryn McPherson (Montreal & Kingston, Ithica, London: McGill-Queens University Press, 2003), 70.

invention of panic about disabled people.¹¹⁷ Although the goals and methods of early eugenicists differed they shared a belief in the link between biology and social progress and this led to a number of problematic family studies aimed at understanding the workings of human heredity.¹¹⁸

One of those who undertook family studies in Ontario was Dr. Madge Macklin and she became a vocal proponent of sterilization in 1930s. She argued that the number of mental cases in the province of Ontario was multiplying so quickly that the CAS could only place the most “flagrant cases” on waiting lists for institutions.¹¹⁹ She provided hypothetical figures and “incontrovertible scientific data” to argue that in just two generations “defectives” would overtake the “intellectual,” what she termed normal, in the population. Macklin claimed medical professionals had a particular duty to act because of their technical skill and the relationship of their work to the “field of preventive medicine.”¹²⁰ She tried to preempt counter-arguments by social workers about environmental upbringing by suggesting that even if defects are not inherited this still did “not affect the argument for sterilization,” maintaining:

If bad environment be responsible for the defects, then dooming a normal child to be raised in the house with defective parents is the

¹¹⁷ Snyder and Mitchell, "Out of the Ashes of Eugenics," 81. Diane B. Paul, *The Politics of Heredity: Essays on Eugenics, Biomedicine, and the Nature-Nurture Debate* (Albany: SUNY Press, 1998). Paul describes the impact of de-skilling and loss of certain kinds of (mainly rural) work for those with different cognitive abilities, as a result of industrialization, socio-economic changes and rise of universal education, all of which contributed to the naturalization of IQ.

¹¹⁸ Susan Lindee, "Genetic Disease in the 1960s: A Structural Revolution," *American Journal of Medical Genetics* 115 (2002): 75-82.

¹¹⁹ Dr. Madge Thurlow Macklin, University of Western Ontario "Genetic Aspects of Sterilization of the Mentally Unfit." *The Canadian Medical Association Journal* (February 1934):190-195.

¹²⁰ *Ibid.*,190.

surest guarantee of producing similar defects in the offspring through adverse environmental conditions.¹²¹

Interest in heredity as an explanation of individual differences had been around since antiquity, but at the end of the 19th century it gained prominence in social analysis and rationalization.¹²² Hereditarian ideas were widely shared by biologists, publicists, elite physicians as well as laypeople, and given formal sanction in science and medicine.¹²³ The difference, according to medical historian Charles Rosenberg, is that the twentieth century determinism that we associate with the eugenics movement was atypical, as social hereditarianism was more optimistic in the previous century. Likewise, medical philosopher George Canguilhem described a “tragic turn” at the end of the 19th century, as the celebration of *variability* in human biology was replaced by an *evaluative* impulse marked by the judgment of human differences, and mutation was no longer conceived of as elasticity but instead as nature “gone awry.”¹²⁴ The new version of genetic disease was aided by “the theory of evolution, the acceptance of Mendel’s particular inheritance” and the growth of family and twin studies leading eugenics advocates to link many different forms of disease to heredity and call for their “eradication.”¹²⁵

¹²¹ *Ibid.*, 195.

¹²² Charles Rosenberg, *No Other Gods: On Science and American Social Thought* (Baltimore and London: John Hopkins University Press, 1976); See also: Ruth Hubbard and Elijah Wald, *Exploding the Gene Myth: How Genetic Information is Produced and Manipulated by Scientists, Physicians, Employers, Insurance Companies, Educators, and Law Enforcers* (Beacon Press: Boston, 1993); Richard Lewontin, Steven Roke and Leon J. Kamin, “IQ: The Rank Ordering of the World,” in *The “Racial” Economy of Science: Toward a Democratic Future*, ed. Sandra Harding (Bloomington & Indianapolis: Indiana University Press, 1993), 142-161.

¹²³ Rosenberg, *No Other Gods*, 26.

¹²⁴ Georges Canguilhem quoted in Snyder and Mitchell, “Out of the ashes of eugenics,” 80.

¹²⁵ Lindee, “Genetic Disease in the 1960s,” 77.

Prominent women such as Charlotte Whitton and Helen MacMurphy worked tirelessly to improve infant and maternal welfare, warning of the “nationalistic implications” of degeneracy while idealizing maternity and arguing for policies to separate sexually deviant women from potential mothers.¹²⁶ As Chief of the Child Welfare Division, Federal Department of Health and in Ontario, Dr. MacMurphy had spent years as special inspector of the feeble-minded. She supported maternal feminists as a lobbyist for the National Council of Women, advocating public health education rather than tackling substantive structural reforms.¹²⁷ Once she defined the “problem of the feeble-minded as a women’s issue” she turned her attention to unwed mothers.¹²⁸

Between 1900-1920 the work of the CNCMH and the Toronto Psychiatric Clinic (TPC) had been central to the construction of the “feeble-minded” as a category, and it was flexibly applied to young working-class women, particularly if they became pregnant “out of wedlock.”¹²⁹ Young women who did not conform to normative standards were frequent targets, and immigrant unwed mothers were often deported. The detection of feeble-mindedness depended on psychiatric knowledge and measurement technologies, but the degree to which the concept became autonomous involved translation, or network building. Actor-network theorists argue this depended on the ability of mental hygiene professionals to expand the relevance

¹²⁶ Dianne Dodd, "Advice to Parents: The Blue Books, Helen MacMurphy, MD, and the Federal Department of Health, 1920-1934," *Canadian Bulletin of Medical History* 8 (1991): 210.

¹²⁷ Dodd, "Advice to Parents," 203-230; Arnup, *Education for Motherhood*.

¹²⁸ Dodd, "Advice to Parents," 213. MacMurphy was replaced by Charlotte Whitton.

¹²⁹ Jennifer Stephen, "The 'Incorrigible,' the 'Bad,' and the 'Immoral': Toronto 'Factory Girls' and the Work of the Toronto Psychiatric Clinic," in *Law, State and Society: Essays in Modern Legal Authority*, ed. Louise Knafla & Susan Binnie (Toronto: University of Toronto Press, 1995), 405-439.

of their expertise beyond the lab. Science works outside the lab because, as Whelan frames it, the world is “tinkered with.”¹³⁰ Social worlds theorists emphasize this two-way process, or mutual collaborations, between psychiatrists and extra-state agencies.

One of the main eugenic objectives of the CNCMH was to regulate women of childbearing age and the working or “factory girl” was believed to be a particular menace.¹³¹ She was defined by psychiatrists as an “occupational wanderer” and called socially inefficient because she “got herself into” low-paid work.¹³² Reformers also feared that once healthy young women found independence by earning wages they might not take up their “national duty” to the race.¹³³ Those on the lookout for signs of feeble-mindedness said that outward appearances were “deceiving,” especially for young women categorized as “high grade mental degenerates,” because they tended to fit ideal physical standards of beauty. According to Stephen, a woman’s “good looks” were framed as a “menace” to herself and society, so the body had to be carefully read for its deception.¹³⁴ It was a circular argument. Working girls were categorized as “high grade moron” because they did not conform to social norms, proving they “did not recognize the most moral obligations” and were, thus, mentally deficient.¹³⁵ In one sample of 125

¹³⁰ Bruno Latour, *NOUS* 22 (1988): 67-69; Emma Whelan, "'Well Now, Who's the Doctor Here?'" Boundary-Work and Transgression in Patient and Expert Knowledges of Endometriosis," (PhD diss, Carleton University, 2000), 40.

¹³¹ Stephen, “The 'Incorrigible,' the 'Bad,' and the 'Immoral'”, 405-439.

¹³² Ibid.

¹³³ Carolyn Strange, *The perils and pleasures of the city: Single, wage-earning women in Toronto, 1880-1930* (Ph.D. diss. Rutgers University, 1991).

¹³⁴ Stephen, “The 'Incorrigible,' the 'Bad,' and the 'Immoral'”, 409.

¹³⁵ Ibid., 422.

immigrant girls examined at the TPC, the fact that 18 of them had “illegitimate” children was taken as proof of their degeneracy.¹³⁶

Similar ideas and warnings are found in records produced by workers at the Toronto Infants’ Home, where the social problem of the “unwed mother” was largely associated with “girls” of “limited mental capacity,” the majority of whom were working-class, categorized as “factory” girls and domestics.¹³⁷ These early service providers advocated moral reform through increased education in mental [and sexual] hygiene, suggesting the public needed to understand who these girls were, “their wills and controls are weak...they are unable to reason or benefit from instruction” and the public needed to understand [sex delinquency] was a problem of public health/maternity and child welfare.¹³⁸

Workers at the home believed girls got themselves into their “situation” and became pregnant through a combination of their weak “wills,” mental deficiency, and good looks.¹³⁹ They held unwed mothers disproportionately morally and socially responsible despite the fact their own records describe some of the men who fathered children as much older, frequently married, a male employer, or relation.¹⁴⁰ Early social workers, doctors and psychiatrists, reinforced the sexual double-standard, strategically drawing on feeble-mindedness as a catch-all category for any non-normative behaviour. But more importantly was how the evaluation of

¹³⁶ Angus MacLaren, *Our Own Master Race: Eugenics in Canada, 1885-1945* (Toronto, McLelland & Stewart, 1990).

¹³⁷ “Better Care for The Unmarried Mother,” (OACAS) 1925; Dodd, “Advice to Parents,” 203-230.

¹³⁸ “Better Care for The Unmarried Mother,” (OACAS) (AO).

¹³⁹ Ibid.

¹⁴⁰ Ibid.

differences in intellectual ability was normalized and increasingly linked to social worth. Any “observable” differences were marginalized, stigmatized and used to rationalize, restrict and distinguish unequal forms of citizenship.¹⁴¹

A woman’s efficiency was equated with her capacity for motherhood and reformers like J.J. Kelso believed that the social order had broken down because environmental conditions in crowded cities pushed young women into factory work.¹⁴² Whitton blamed the current economic crisis on the "unregulated immigration" carried on in the pre-war period, arguing that Britain had been dumping its “surplus labour.”¹⁴³ She and groups like the United Farm Women's Association of Alberta argued for the scientific and medical regulation and selection of immigrants in order to “weed out” the mentally deficient as well as a whole host of unseemly degenerates, such as the “epileptic, tubercular, blind, dumb, illiterate, criminal and anarchistic.”¹⁴⁴ An enigmatic figure, Whitton was architect of the first adoption act and used her role as Secretary of the Canadian Welfare Council to emphasize the symbolic value of welfare work:

Our full strength and resources are bent to the task of keeping this country strong, virile, healthy, and moral, and we insist that the blood that enters its veins must be equally pure and free from taint.¹⁴⁵

¹⁴¹ Allison C. Carey, “Beyond the Medical Model: a reconsideration of ‘feble-mindedness’, citizenship, and eugenic restrictions,” *Disability & Society* 18, no. 4 (2003): 411-430. John Law, “Introduction,” in *The Sociology of Monsters: Essays on Power, Technology & Domination*, (London & New York: Routledge, 1991), 1-19.

¹⁴² Stephen, “The ‘Incorrigible,’ the ‘Bad,’ and the ‘Immoral’” 414. Joan Wallach Scott, *Only Paradoxes to Offer: French Feminists and the Rights of Man* (Cambridge, Mass. London: Harvard University Press, 1996), 97. Scott critiques Emile Durkheim’s evolutionary account in which the naturalist sexual and social division of labour is used to explain women’s exclusion from politics.

¹⁴³ MacLaren, *Our Own Master*, 63-64.

¹⁴⁴ Ibid.

¹⁴⁵ Rooke and Schnell, *No Bleeding Heart*, 23.

Once a link was made between unwed mothers, feeble-mindedness and illegitimate children it “cast a pall over all adoptions.”¹⁴⁶ In the years between 1910-1925, most practitioners “advocated separating the feeble-minded unwed mother from her children” and argued that “defective” children be institutionalized.¹⁴⁷ Early adoption advocates, like those who followed, had to manage a central contradiction as they “downplayed the importance of heredity” but “could not ignore it.”¹⁴⁸

The Adoptable Child and the Concept of Adoptability

The second phase of adoption, between the 1920s and 30s, is described as the “gilt edged child” era of adoption because many children were considered “unadoptable” due to hereditary factors and only “blue-ribbon” babies were selected.¹⁴⁹ Social workers did not challenge hereditarian ideas but tried to give parents assurances by gathering “detailed information about the child’s maternal and paternal background,” and only placing children when there were no “negative factors,” the child was in “excellent health,” and perceived to be “progressing normally.”¹⁵⁰ The typical practice was to only place children who were over six months of age after a period of observation and testing. Matching strategies or practices were used, which meant providing a child who appeared “as if born to” the

¹⁴⁶ Carp, *Family Matters*, 18. See also Phillips, “Blood Not Thicker.” Articles in Canadian magazines and social work journals also warned about the risks of unknown heredity.

¹⁴⁷ Carp, *Family Matters*, 19.

¹⁴⁸ Carp, *Family Matters*, 19; Sales, *Adoption, Family and the Paradox of Origins*, np.

¹⁴⁹ Lemon, “Rear-View Mirror,” (1959): 2 (AO) RG 29 Files.

¹⁵⁰ Mary Speers, CAS of Toronto, “Speech to Protestant Children’s Homes on Adoptions Practices” (1951):1 (MTA) CAS Fonds 1001-Box, 76.

adoptive couple, because of the emphasis on hereditary factors but also because of the cultural stigma associated with adoption.¹⁵¹

By the 1920s, everything about the child was discussed, and social workers placed more emphasis on acquiring “background information” on the child and mother, a vague yet far-reaching category that included “social problems.”¹⁵² The language of risk was ubiquitous and one of the unintended effects was to elicit more fear in the wider public, “[A]doption was considered to be a great risk[as] children might turn out to have ‘bad blood’ like their parents. Adoptions were not numerous.”¹⁵³ One leading adoption worker at the Toronto CAS claimed that neither parents nor the community at large had much faith in adoption during the 1930s. She attributed most of the blame to lack of skill in early case-work practice, which led to indiscriminate placements. The skills involved in fitting children and parents together were not previously understood and as a result many adoptions “failed.”¹⁵⁴ Speers was not alone in blaming failures on the “free-market” approach to adoption conducted by amateurs, wealthy middle-class women volunteers, and social workers with no formal scientific training, and who were accused of meeting adoption requests on a personal or ad hoc basis.¹⁵⁵

Postwar social workers claimed that one of the key differences of the first era of adoptions was the fact that “little or no significance” was attached to the *background* of the child. The main focus of early child welfare workers was to “find

¹⁵¹ Lemon, “Rear-View Mirror,” 2 (AO) RG 29 Files; Garber, *Disclosure of Adoption Information*.

¹⁵² Lemon, “Rear-View Mirror,” 2 (AO).

¹⁵³ Guyatt, “Adoptions in Ontario,” 13.

¹⁵⁴ Speers, “Speech to Protestant Children’s Homes,” (MTA) CAS Fonds 1001-Box, 76.

¹⁵⁵ Carp, *Family Matters*, 19.

enough adoption homes for all the “rescued” children” in the care of the CAS, and homes were recommended without the formal scrutiny of social workers, to “responsible citizens.”¹⁵⁶ I found some evidence to support this practice. In the 1930s, the managers of the Infants’ Home of Toronto expressed concern about the historical practice of police officers taking in and fostering children in care who needed homes.¹⁵⁷ Some children were sent “as far away as Manitoba and the North West Territories” until this practice changed in the 1920s. In her own history of orphan trains that transported Catholic children across the U.S., and to Mexico, Linda Gordon found that gradually race and class anxieties led to battles about whether religion should in fact trump national, regional and cultural belonging.¹⁵⁸

But although child-placers may not have formally emphasized background, when adoptions “failed,” people drew on folk theories to blame the child, and attributed a broad spectrum of behaviours to heredity. As one welfare worker put it: “people in the community were very prone to blame the child for these adoption failures, feeling that he had inherited an ungrateful nature, a bad temper, deceitfulness, etc.”¹⁵⁹ Postwar social work leaders argued that it was the negative

¹⁵⁶ Lemon, “Rear-View Mirror,” 1-16 (AO).

¹⁵⁷ “Minutes,” Board of Managers (1930-1951) (MTA) Infants’ Home Fonds 1404, Series 855. #149022, File 4.

¹⁵⁸ Lemon, “Rear-View Mirror,” 2; Linda Gordon, *The Great Arizona Orphan Abduction* (Cambridge, Mass., London, England, Harvard University Press, 1999). For a detailed history of the practice, briefly mentioned here, see Linda Gordon’s account of the orphan trains that ferried children across the United States to expectant adoptive parents.

¹⁵⁹ Speers, “Speech to Protestant Children’s Homes,” 1.

“community attitude” toward adoption that had to be addressed, rather than their predecessors’ resistance, explaining many couples were still reluctant to adopt.¹⁶⁰

Social workers engaged in a delicate balancing act, trying to satisfy the “interests of [middle-class] adopting parents” while reinvigorating the “good name” of “adoption.”¹⁶¹ Agencies reported an “accumulat[ion]” of children because of the poverty of the depression years, a situation they believed could only worsen with the “for better or worse” implications of legal adoption and the record of failed adoptions from previous years.¹⁶² As a result, social workers became over-protective of parents in their attempt to instill confidence in the process.

Because the focus of social workers was on the needs of parents rather than children, workers would only place babies where the history was known, leading many parents to assume they could predict the outcome.¹⁶³ Social workers tried to play it safe only selecting children they could “practically guarantee” like one more consumer product.¹⁶⁴ Adoption leaders in the 1950s justified the cautiousness of their predecessors by arguing that the end result was positive, community attitudes changed and adoption became more culturally acceptable.¹⁶⁵ By the mid-1930s, public agencies in Ontario once again began to take stock of their adoption practices, and focus on children who had not been placed and were in permanent care.

¹⁶⁰ Popular fears about the hidden dangers of adopting a child with “bad blood” were depicted in Sinclair Ross’ (1941) classic depression era novel, *As For Me and My House*. The same negative, community, attitudes were described by the Supervisor of the Adoption Department, at the CAS and Infants’ Homes of Toronto. Mary Speers, “Adoption is for Children Who Need Parents,” *The Social Worker* 23, no. 1 (October, 1954):1.

¹⁶¹ Speers, “Adoption is for Children,” 1.

¹⁶² Ibid.

¹⁶³ Guyatt, “Adoptions in Ontario,” 13.

¹⁶⁴ Speers, “Adoption is for Children.”

¹⁶⁵ Speers, “Speech to Protestant Children’s Homes,” 1-9.

The advertising of children for adoption began in earnest with the “Quints.”¹⁶⁶ In 1935, the province of Ontario announced “Adopt-A-Child” week in the *Globe & Mail* newspaper by marking the Dionne Quintuplets 1st birthday. The campaign was launched because of a shortage of potential adoptive parents and their public service announcement the editors noted that many people had not even considered adoptions.¹⁶⁷ On one hand, the success of these early campaigns appears to have been borne out. According to the head of the Toronto CAS adoption department, by 1940 the demand for babies could not be met.¹⁶⁸ However, advertising campaigns exposed a dilemma for social workers attempting to professionalize, because it was perceived as undermining professional authority.¹⁶⁹

The medical model of professionalization that social workers aspired to underlined a distinction between customers versus clients:

In a nonprofessional occupation the customer can criticize the quality of the commodity he has purchased and even demand a refund. The client lacks this same prerogative, having surrendered it to professional authority. This element of authority is one, although not the sole, reason why a profession frowns on advertising. If a profession were to advertise, it would, in effect, impute to the potential client the discriminating capacity to select from competing forms of service.¹⁷⁰

Customers could determine and evaluate their own needs, and even demand a refund, whereas clients invested professionals with a “monopoly of judgment” based on the

¹⁶⁶ Many readers will be familiar with “Today’s Child” advertisements in local newspapers, undertaken by Helen Allen. (AO) RG 21-01-491. In oral testimony obtained for my previous master’s research, I was told it was not uncommon for the CAS to launch promotional campaigns for adoption around Christmas. The seasonal adoption campaign was picked up by local humane societies.

¹⁶⁷ Speers, “Speech to Protestant Children’s Homes,” 2.

¹⁶⁸ *Ibid.*, 1-9.

¹⁶⁹ Greenwood, “Attributes of a Profession,” 48.

¹⁷⁰ *Ibid.*

attainment of theoretical knowledge.¹⁷¹ Public adoption services were advertised in popular magazines and newspapers over the following decades, and the campaigns not only provide insights into how the ideal adoptable child and adoptive candidates were being conceived, but one of the lasting contradictions and tensions attached to professionalization.

One candid example is an article written for the popular Canadian magazine *Maclean's* in September 1938, by Vera Moberly, the Director of the Toronto Infants Home.¹⁷² The article, entitled "We Want a Child," promoted adoption by trying to reassure parents that adoption was safe. Moberly claimed that "[A]n increasing number of married couples who have no children of their own are seeking added happiness via adoption," and she argued adoption was more popular in Ontario because there was less risk and "more is known about children available for adoption."¹⁷³

Moberly constructed an image of typical, potential adoptive parents, uniting middle-class expectations with the supply-demand language of the market. Ideal parents tended to be those with above-average education and were more "well-to-do" so, she wrote, it was only natural for them to expect "perfect" children: "[T]he crux of the problem is a shortage, not of children but of the *type of children* adopting

¹⁷¹ Ibid.

¹⁷² It also stands out because it was archived in the records of the CAS.

¹⁷³ Vera Moberly, "The Role of the Social Agency in Adoption," *Maclean's* (September 15, 1938). (MTA) CAS fonds 1001 Series . Moberly was Director of the Infants' Home of Toronto.

parents want."¹⁷⁴In other words, their expectations were reasonable, or at least understandable: above average members of the population deserved the best children.

Moberly was writing in the shadow of war and depression and of the total 275 children at the CAS and The Infants' Homes, 132 belonged to parents who hoped to take them back when their circumstances changed. The other 143 came from parents who, she claimed, "wished to abandon responsibility" permanently. Her descriptions of the children were meant to illustrate the dire conditions faced by agencies. But they also give us insight into conventional ideas about heredity and disability, and typical practices within agencies. She was forthright in stating that 17 children "had [handicaps or mental limits] or definite hereditary deficiencies which made it impossible for any [agency] to recommend them for adoption," while 42 had retardation or questionable heredity and, therefore, "could not be placed without further and probably prolonged observation."¹⁷⁵ In the end, only 30 children (11% of total) were considered suitable, because "they had passed rigorous physical and psychological tests" and "satisfactory information had been obtained in regard to hereditary factors."¹⁷⁶ Moberly admitted being perplexed about the fact that, despite the agencies' rigorous screening, there were not more willing adoptive parents and completed adoptions. Social workers became more reflexive in later years, admitting they may have created "fears in the adopting parents" in the early stages of adoption.¹⁷⁷

¹⁷⁴ Ibid.

¹⁷⁵ Moberly, "Role of the Social Agency."

¹⁷⁶ Ibid.

¹⁷⁷ Lemon, "Rear-View Mirror," 1-16.

By the end of the 1930s, social workers, psychologists and doctors began to emphasize invisible constitutional and developmental features, in advice literature and health promotion campaigns geared to scientific motherhood. However, rigid beauty ideals, based on narrowly defined Nordic pheno-typical features, remained culturally dominant.¹⁷⁸ The following narrative case-file, provided by Moberly, illustrates the kinds of cultural prejudice and consumerist ethos that permeated adoption, and the mixed messages given by social workers:

After two weeks only five had been placed; twenty-five remained. One sturdy, golden-haired boy, who at the age of three had an intelligence quotient that would probably have enabled him to profit, in due time, by a course in law or medicine, had been shown for a number of months. He was not ugly, but several prospective parents considered his nose and lips too large.¹⁷⁹

The problem of adoption continued to be framed in market terms as one of “supply and demand,” whereby parents were treated as customers who could shop around. The “shortages” more accurately referred to a shortage of the *kind* of children that ideal parents, with above average education and economic means, wanted and deserved:

The parents want children in perfect health, with physical characteristics akin to their own, with freedom from hereditary taint, and with intelligence high enough to meet their educational ambitions.¹⁸⁰

¹⁷⁸ Alexandra Minna Stern, “Better Babies Contests at the Indiana State Fair: Child Health, Scientific Motherhood, and Eugenics, 1920-35,” in *Formative Years: Children’s Health in the United States, 1880-2000*, ed. Alexandra Minna Stern and Howard Markel (Ann Arbor: Michigan University, 2002), 121-152.

¹⁷⁹ Moberly, “Role of the Social Agency.”

¹⁸⁰ *Ibid.*

Adoptive parents appeared just as superficial and stubborn as “biological” parents, who resisted the efforts of public health professionals in better baby contests designed to promote scientific motherhood. The latter were often unsuccessful in getting parents to look beyond superficial beauty ideals, to measure health outcomes instead.¹⁸¹

Moberly’s belief that parental expectations stemmed from a consumerist model of parenting, suggests that our contemporary concerns about designer babies are not new. She described a key difference between adopting and having one's own children as the fact that the latter "would have to be satisfied with unalterable characteristics;" but once the possibility of choice was involved, "[parents] have already decided exactly what these characteristics are to be, and nothing will make them change their minds.” To accentuate her point Moberly provided a catalogue of common requests from would-be adoptive parents:

‘He must be strong, a good athlete’; with 'dark eyes like my husband' 'mechanically bent, so that he can take over my business when I retire,' tall because 'we are both tall.' ‘She must have 'flaxen curls and blue eyes because that is what I always wanted for my child;' she must be small boned and musical. She must be exactly six months old. In a surprising majority of cases, 'it must be a girl.’¹⁸²

Social work historians suggest that adoption workers were responding to the expectations of parents when they adopted market tropes. However, I suggest that social workers’ historical ambivalence about adoption, and the prevalence of eugenic thought must be factored in.¹⁸³ It is not easy to separate description from

¹⁸¹ Minna Stern, “Better Babies Contests,” 121-152.

¹⁸² Moberly, “ Role of the Social Agency in Adoption.”

¹⁸³ Swain, "Market Forces," 15.

legitimation in Moberly's account when she argued, what people did not want is "an ordinary little boy who is not very attractive in appearance and whose intelligence is not very high; the [same] child who will be an almost normal adult, and who would be accepted as average and perfectly lovable, had he a normal home of his own."¹⁸⁴ Nevertheless, she said she was sorry that parents did not adopt for the "sake of the child," claiming she was of the opinion that all children were potentially "lovable."

The reason children were piling up in institutions was because parents tended to decide whether they liked a child on first glance, even though most children would become "indispensable" if they were involved in every day life companionship with adults.¹⁸⁵ In the end, the adoptable child was assumed to be "[t]he attractive baby with good background" who was understood to be white, Anglo-Saxon, protestant and from a good *class* background.¹⁸⁶ The growing number of children who came into and remained in care was defined as a private problem, blamed on parents rather than social work interventions, leaving the public problems faced by parents and families unaddressed.

Social workers in Ontario, as in the United States, would face a number of obstacles as they attempted to professionally manage adoptions, from adoptive parents who resented restrictions, religious and ethnic communities who considered children vital resources, and ongoing debates about the legitimacy, cost, and expansion of the welfare state.¹⁸⁷ Despite these cultural and practical challenges

¹⁸⁴ Moberly, "Role of the Social Agency in Adoption."

¹⁸⁵ Moberly, "Role of the Social Agency in Adoption."

¹⁸⁶ Aitken, "Critical Compromises," 274-299.

¹⁸⁷ Herman, *Kinship by Design*, 48-52.

social work leaders persisted in claiming professional, social and cultural authority over the task of child placement. However, the strategies they used did not simply mimic the male, medical model of professionalization that aspired to a monopoly of judgment in order to secure that authority. Social workers forged alliances with members of other professionals.

Any account of postwar adoption cannot ignore the professional rivalries between medicine, psychiatry, psychology and the newer field of social work, but must also consider struggles within the profession.¹⁸⁸ These internal conflicts and professional rivalries are discussed in more detail in the following chapter three, to provide context for understanding social workers' gendered strategies of professionalization.

¹⁸⁸ Anselm L. Strauss and Rue Bucher, "Professions in Process," in *Professions, Work and Careers*, ed., Anselm L. Strauss (New Brunswick: Transaction Books, 1975), 9-23.

Chapter Three

Professionalization and The Growth of the Therapeutic State

Contemporary adoption and social work historians agree that a scientific imperative took hold in public agencies and charitable organizations in the early 20th century, though there are debates about the degree to which it supplanted religious dominance. Modernization was equated with science, understood as methodology guided by theoretical knowledge and a spirit of objective inquiry, leading to efficient intervention. Adoption practitioners of the 1950s also described the third phase of modern adoption as the *outcome* of modernization and the professionalization of social work. But rather than treating scientific adoption as an outcome of successful professionalization strategies, I suggest we analyze it as a case of “science in the making” and a social movement *within* the profession.¹ Adoption became both a practical problem and a *means* for social workers trying to improve their position and resolve occupational struggles. Still, many scholars believe the gendered notion of professionalization that social work leaders and academics aspired to in the 1940s and 50s, made it, in some ways, a failed project.²

The concept of professionalization has been understood in various and overlapping ways by scholars to refer to a paradigm and/or theoretical framework,

¹ Anselm L. Strauss and Rue Bucher, "Professions in Process." In *Professions, Work and Careers*, edited by Anselm L. Strauss (New Brunswick: Transaction Books, 1975) Reprint, *The American Journal of Sociology* 66 (January 1961): 20.

² Tracey L. Adams, "Professionalization, Gender and Female-Dominated Professions: Dental Hygiene in Ontario," *The Canadian Review of Sociology* 40, no. 3 (2003): 284. In part because of gender but also because of how images of science were used.

an ideology, a set of strategies, and a social movement.³ I use the term to mean a set of strategies, while analyzing adoption as a social movement within social work. I combine science studies (SWAT and ANT) and systems approaches to the professions by modifying Adams' working definition of professionalization. She describes it as a social movement "whereby occupational leaders pursue a number of strategies--including establishing expertise, cultural authority, market control, and social closure--to achieve professional status."⁴

Previous research has examined the ways that gender is attached to the meaning of profession and how professionalizing strategies are themselves gendered.⁵ There has been a tendency to focus on how male professions successfully excluded women from certain domains, through a gendered division of labour that relegated women to auxillary, emotional, or care-work, which male-dominated professions were dependent upon and/or differentiated themselves from.⁶ The addition of SWAT brings different kinds of invisible work into view, such as the network building and cooperative work required to make science work and for a profession to achieve social closure.

³ Adams, "Professionalization, Gender," 269; McPherson, *Bedside Matters*, 9-13; Strauss and Bucher, "Professions in Process," 20.

⁴ Adams, "Professionalization, Gender," 269; Strauss and Bucher, "Professions in Process," 20; Susan Leigh Star, "The Sociology of the Invisible: The Primacy of Work in the Writings of Anselm Strauss." In *Social Organization and Social Processes: Essays in Honour of Anselm L. Strauss*, ed., David Maines (Hawthorne, New York: Aldine de Gruyter 1983), 265-83.

⁵ Adams, "Professionalization, Gender," 270; Baines, "The Professions and an Ethic of Care," 36-55; McPherson, *Bedside Matters*, 9-13.

⁶ Adams, "Professionalization, gender," 269; Barbara Melosh, "More Than 'The Physicians Hand': Skill and Authority in Twentieth-Century Nursing," in *Women and Health in America: Historical Readings*, ed., Judith W. Leavitt (Madison, WI: University of Wisconsin Press, 1999), 482-96; Baines, "Professions and an Ethic of Care," 36-57; McPherson, *Bedside Matters*, 13-15.

Feminist welfare scholars highlight the persistent tension that exists in social work between the values and “ethic of care” versus the ethos of professionalism. Early social workers, with roots in social activism, distinguished the work of caring from professionalization. However, after the Second World War, social work leaders began to advocate a model of professionalization identified with the medical profession. The attribute, or trait model, advocated by Albert Flexner in the 1920s reached its zenith in the 1950s, in the work of social welfare scholar Ernest Greenwood, who is recognized as helping to legitimize the field of social work with this model of professionalization.⁷

Greenwood, largely influenced by structural functionalism, argued that one of the central attributes of a profession was a specialized body of theoretical knowledge, which formed the basis of professional and cultural authority. On this front social work was only considered to have made middling progress.⁸ Feminist scholars, critical of the professionalization paradigm, argue the emphasis on special knowledge and expertise still obscured that fact that “the key element is social power.”⁹ Baines, like Herman, contends that social workers achieved the “illusion” of creating a specialized body of social work knowledge. As Herman suggests, in the postwar period, they endowed themselves with a “collective consciousness” that brought an “imagined professional community into being: a community of adoption

⁷ Ernest Greenwood, "Attributes of a Profession," *Social Work* 2, no. 3 (1957): 45-55. See also: "Obituary, Ernest Greenwood (1910-2004) Professor Emeritus " University of California, <http://socialwelfare.berkeley.edu/faculty/ernest-greenwood-1910-2004>.

⁸ Greenwood, “Attributes of a Profession,” 47.

⁹ Baines, “The Professions and an Ethic of Care,” 37.

experts operating in state-sanctioned agencies on the basis of systematic training, empirical inquiry, and verifiable results.”¹⁰

Given the existence of an anti-adoption bias within the profession, what changed for social workers to claim jurisdictional authority over adoption? How did social work leaders come to enroll the public, members of their own profession, and other professions in a process of scientific claims making through adoption? Most adoption scholars suggest a shift in perspective was facilitated by the growing influence of psychoanalysis and the Freudian world-view, which shaped the first set of North American adoption standards in 1938.¹¹ Indeed, the first standards in Ontario reflect a discursive shift, as unwed mothers went from being female sinners and victims, to figures of “psychopathological maternity” who could be cured.¹² The same shift applied to “deviant” children, transformed from criminals and victims, to maladjusted individuals who could be rehabilitated with the proper environment.¹³

However, not all social workers and unwed mothers accepted the new psychological explanations of unwed pregnancy. In one very public polemic, an Ottawa social worker criticized the caricature of the ideal families and unwed

¹⁰ Herman, *Kinship by Design*, 46.

¹¹ Ellen Herman, “The Paradoxical Rationalization of Modern Adoption.” *Journal of Social History* 36, no.2 (2002): 360; Frances Latchford, *Family Intravenous: The Modern Western Bio-Genealogical Imperative and the Production of 'Family' Experience* (PhD diss, York University, 2003), 280; Sally Sales, *Adoption, Family and the Paradox of Origins: A Foucauldian History*. London, New York: Palgrave, MacMillan, 2012.

¹² Eleanor Lemon, “Rear-View Mirror: an Experience with Completed Adoptions.” (AO) RG 29-1 Files, 1959; Ken Lefoih, “The Happy Havens of Sister Mechtilde”, *Maclean's* (October 24, 1959), 20; Mary Speers "Adoption is for Children Who Need Parents," Dept. Supervisor, Adoption Department, CAS and Infants' Homes, Toronto, *The Social Worker* 23, no. 1 (1954): 2 (MTA) CAS fonds 1001; Ricki Solinger, “The Girl Nobody Loved: Psychological Explanations for White Single Pregnancy in the Pre-Roe v. Wade Era, 1945-1965,” *Frontiers: a journal of women's studies* 11, nos.2/3 (1990): 6.

¹³ Turmel, *Historical Sociology of Childhood*, [] .

mothers being represented.¹⁴ Other social workers still had to be convinced that adoption was safe or wise, and not everyone within the profession embraced the scientific approach to social work. There continued to be conflict within the profession about the goal of professionalization, and there were still philosophical differences between those who advocated social reform over individualized treatment.¹⁵

Any account of postwar adoption cannot ignore the professional rivalries between medicine, psychiatry, psychology and the newer field of social work. Just as important, however, were struggles within the profession. There were conflicts within the profession based on methodological differences, what the core values and work activities of the profession were supposed to be, which clients they were supposed to serve and how.¹⁶ Adoption provided a unique “sense of mission” to a segment of the social work profession, built on the legacy of civilizing missions and nation-building efforts, as they tried to redefine their professional identity.¹⁷ In the chapter, I consider the contradiction and question of how social workers helped to create the “therapeutic state,” while still remaining vulnerable as a profession within it.¹⁸

¹⁴ Svanhuit Jose, “The American Caricature of the Unmarried Mother,” *Canadian Welfare* 31, no.5 (December 1955): 246-249.

¹⁵ Greenwood, “Attributes of a Profession,” np.; Leslie Margolin, *Under the Cover of Kindness: The Invention of Social Work* (Charlottesville and London: University Press of Virginia, 1997) np. Baines, “Professions and an Ethic of Care,” np.

¹⁶ Strauss & Bucher, “Professions in Process,” 20-23.

¹⁷ *Ibid.*, 11.

¹⁸ Laura Epstein, “The Therapeutic Idea in Contemporary Society,” in *Essays on Postmodernism and Social Work*, ed., Adrienne S. Chambon and Allan Irving (Toronto: Canadian Scholar's Press Inc., 1994), 3-18; Laura Epstein, “The Culture of Social Work,” in *Reading Foucault for Social Work*, ed.,

The problems of unwed motherhood, childlessness, and childhood were reimagined during the 1940s and postwar period, as social workers drew on new “psy” and medical knowledge to try and consolidate their authority, expand their expertise, and maintain their autonomy. Andrew Abbott suggests that the development of new knowledge can help to consolidate an emerging profession, or expand an existing profession, usually at another profession’s expense. He used examples that include the arrival of scientific medicine in the late nineteenth century, the twentieth century theory of narcissism for consolidating psychoanalysis, and theories of juvenile delinquency for psychology.¹⁹ At the same time, sociologists maintain that professional discourses like social work and psychology helped to constitute the very problems and social categories they claimed to discover.²⁰

Science studies theorists emphasize the fact that science is a material as well as discursive practice. Science is not simply about description but involves ongoing practical activities that require cooperation between many actors/actants, including scientists and non-scientists, humans and non-humans, all of which help to “extend scientific claims across time and space.”²¹ In this chapter, I provide some background in order to understand the network building activities of social workers,

Allan Irving, Adrienne S. Chambon, and Laura Epstein (New York: Columbia University Press, 1999), 3-26.

¹⁹ Andrew Abbott, *The System of Professions: An Essay on the Division of Expert Labor* (Chicago and London: University of Chicago Press, 1988), 96.

²⁰ Kari Dehli, "Fictions of the scientific imagination: Researching the Dionne Quintuplets," *Journal of Canadian Studies* 29, no.4 (1994): 1-17.

²¹ Emma Whelan, “Well now, who’s the doctor here?” *Boundary-work and Transgression in Patient and Expert Knowledges of Endometriosis*, (PhD diss, Carleton University, 2000) 41; Joan Fujimura, “The Practices of Producing Meaning in Bioinformatics,” *Sociology of Science Yearbook* 19 (1999): 79-80.

who forged alliances with members of other professions in the formation of an adoption knowledge network.

Becoming Part of The Childhood Collective

One of the things that united the two professions of social work and medicine was their individual and combined efforts to position themselves as advisors to parents and children on behalf of the state. In the years between 1900 and 1940 their shared focus was directed towards mothers and children, because the latter came to signify future national health.²² The development of specialized forms of medicine such as pediatrics was part of larger public health campaigns, and depended on the growing recognition by politicians, maternalists, mothers and physicians that children were a valuable national resource.²³ Medical examinations, inspections and social welfare interventions developed alongside each other and were justified as necessary to “safeguard” the health of children.²⁴ Some historians argue that doctors quickly realized that pediatrics “provided a lucrative portal to an expanding practice,” along with the focus on maternal health.²⁵

²² Cynthia Comacchio, *Nations are Built of Babies: saving Ontario's mothers and children, 1900-1940*. Montreal: McGill Queen's Press, 1993; Sharon Stephens, "Editorial Introduction: Children and Nationalism," *Childhood* 4, no. 5 (1997): 5-17.

²³ For a discussion of the growing ideology and interest in childhood as a “discrete stage” and the collaboration between experts see: Debórah Dwork, “Childhood” in *Companion Encyclopedia of the History of Medicine*, ed, W.F. Bynum and Roy Porter, vol. 2 (Routledge: London and New York 1993), 1072-1091.

²⁴ Dwork, “Childhood,” 1086.; Lorna Weir, *Pregnancy, Risk and Biopolitics: On the threshold of the living subject*. London and New York, Routledge. 2006.

²⁵ Rima Apple, "Constructing Mothers: Scientific Motherhood in the Nineteenth and Twentieth Centuries," *Social History of Medicine* 8, no. 2 (1995): 176.

Others believe that it took a great deal of work to enrol doctors and the federal government, to take seriously the high infant and maternal mortality rates in Canada and the United States.²⁶ What remains undisputed is that during this time, medical practitioners gained “unprecedented authority...remarkably unchallenged” to this day.²⁷ It was not simply that mothers needed more knowledge and information; the goal was to unite mothers and experts “in a close and vital relationship...that would serve both child and nation.”²⁸ Doctors sought to manage all stages of pregnancy and child health through prevention, protection, and education strategies aimed at mothers, and the steady climb of medical expertise coincided with the promotion of “scientific motherhood” in the 1920s and 1930s.²⁹

Scientific progress and socio-economic changes converged to justify the medical management of child-rearing through the discourse of “national productivity” and “efficiency,” a shift well-documented as the “maternal education movement.”³⁰ The contradiction, says Weiss, was that women were told that they were responsible for raising healthy children but were not competent to do so on their own. The solution was expert advice, rather than material support and

²⁶ Dianne Dodd, "Advice to Parents: The Blue Books, Helen MacMurchy, MD, and the Federal Department of Health, 1920-1934," *Canadian Bulletin of Medical History* 8 (1991): 203-230.

²⁷ Comacchio, *Nations are Built of Babies*, 93.

²⁸ Comacchio, *Nations are Built of Babies*, 93. See also: Dodd, "Advice to Parents" 203-30; Apple, "Constructing Mothers," 161-78; Katherine Arnup, *Education for Motherhood: Advice for Mothers in Twentieth-century Canada* (Toronto: University of Toronto Press, 1994).

²⁹ Comacchio, *Nations are Built of Babies*, 93; Dodd, "Advice to Parents," 203-230; Veronica Strong-Boag, "Intruders in the Nursery, Childcare Professionals Reshape the Years One to Five, 1920-1940," in *Childhood and Family in Canadian History*, ed. Joy Parr (Toronto: McClelland and Stewart, 1982), 160-178; Arnup, *Education for Motherhood*.

³⁰ Cynthia Comacchio, "Mechanomorphy: Science, Management, and Human Machinery in Industrial Canada, 1900-45," *Labour/Le Travail* 41 (1998): 35-67; Apple, "Constructing Mothers: Scientific Motherhood," 161-178; Arnup, *Education for Motherhood*.

substantive reforms.³¹ Mothers became both cause and remedy of what was ailing Canadian society, and, as critics like Dodd suggest, it was easier to focus on education rather than institute welfare reforms. The federal government was behind the popularly named “little blue books,” or *The Canadian Mother’s Book*, written by Dr. Helen MacMurchy.³² Beginning in 1923 they were published through the Division of Child Welfare with cooperation from voluntary agencies such as the Council on Child Welfare--whose secretary was Charlotte Whitton-- and with financial support from the Canadian Life Insurance offices.

When Dr. MacMurchy retired, the new “depression government” tried to save money by combining a number of agencies. The Division of Maternal and Child Welfare moved under the umbrella of the Child Hygiene Division, under the direction of social service experts and a new voluntary council led by Whitton.³³ However, doctors opposed the changes saying social workers should not have responsibility for medical and public health, arguing their territory should be limited to “relief,” the only suitable social welfare issue.³⁴ Gender conflicts had already emerged within social welfare organizations in the 1930s, as the direct action approach of radical feminist leaders came into conflict with male political leaders. This resulted in the business-dominated federation of Community Service calling for a new alliance of social service agencies with more men in leadership

³¹ Weiss, “Mother, the Invention of Necessity,” 524-25; Dodd, “Advice to Parents,” 209.

³² Dodd, “Advice to Parents,” 204.

³³ Comacchio, *Nations are Built of Babies*, 98.

³⁴ Comacchio, *Nations are Built of Babies*, 110.

positions.³⁵ However, the goal of professionalization was not restricted to male leaders.

As an outspoken leader, Charlotte Whitton recognized that social workers had the potential to combine the higher vocational calling of social work with a knowledge-based scientific approach to make government welfare services more efficient and “individuals” more self-reliant.³⁶ James Struthers described an explosion in welfare provision in Ontario, from all three levels of government in the 1930s, with over a billion dollars spent on supporting unemployed families.³⁷ As he describes, one of the outcomes of the “dirty thirties” is that a “rudimentary” system of social welfare was put in place, so that by the 1940s professional administration existed at all levels. As Struthers argues, the biggest beneficiaries of this transition were social workers, who retained steady employment during the 1930s. But as professionals responsible for welfare provision they did not always share the “interests of the unemployed” or poor.³⁸ Whitton and the Canadian Council on Child Welfare (CCCW) vociferously opposed mothers’ pensions at the outset, worrying that support for single-mothers would undermine “self-reliance and encourag[e] pauperization.”³⁹

³⁵ Gail Wills, *A Marriage of Convenience: Business and Social Work in Toronto, 1918-1957* (Toronto, University of Toronto Press, 1995); Gail Wills, “Values of Community Practice: Legacy of the Radical Social Gospel,” *Canadian Social Work Review* 9, no.1 (1992): 28-40.

³⁶ Moffatt, *A Poetics of Social Work*.

³⁷ James Struthers, “A Profession in Crisis: Charlotte Whitton and Canadian Social Work in the 1930s,” in *The Benevolent State*, ed., Allan Moscovitch and Jim Albert (Toronto: Garamond Press, 1987), 111-125.

³⁸ James Struthers, “A Profession in Crisis,” 111.

³⁹ Dorothy Chunn and Shelley Gavigan. “From Mother's Allowance to Mothers Need Not Apply: Canadian Welfare Law as Liberal and Neo-Liberal Reforms,” *Osgoode Hall Law Journal* 45, no. 4

The federal government continued to avoid responsibility for child and maternal health, and welfare leaders like Whitton shared the belief of the majority of doctors who believed in individual responsibility for health rather than the state's. Despite having shared values and ideologies, doctors refused to share professional authority with welfare officials.⁴⁰ Within four years, control of the amalgamated department (Child Welfare and Hygiene) was returned to medical authorities and given more funding, whereas Whitton's council role was reduced. The medical profession retained their autonomy and gained a strong role in the state. Their emphasis on health *promotion* and *education* supported efforts to hold off welfarism, which the federal government left as a provincial responsibility.⁴¹

Prevention was one of the key discourses associated with public health promotion and education, and it co-existed with competing welfare ideologies. Andrew Abbott argues that the rhetoric of prevention can be analyzed as a mechanism used by professionals clamoring for jurisdictional change, as it usually appears when a profession is under threat. For example, at the end of the nineteenth century psychiatry used this strategy when state control over mental hospitals made them unattractive, and the profession tried to diversify.⁴²

Initially, prevention ideology claimed to improve population health but programs were often vague and "lacked specific technologies, institutions, and

(2007): 741. See also: Charlotte Whitton, "The Baby Bonus is a Dog in the Security Manger," *Saturday Night* 3 (March 1945): 6.

⁴⁰ Struthers, "A Profession in Crisis," 111-25.

⁴¹ Comacchio, *Nations are Built of Babies*, 102; Finkel, *Social Policy and Practice in Canada*.

⁴² Abbott, *System of Professions*.

personnel to intervene on a large scale.”⁴³ But, according to Castel, this changed when politics and medicine merged in the community mental health movement, with the growth of the “psychiatric society.”⁴⁴ Medical intervention and social action became “indistinguishable” as professionals attempted to deal with internal contradictions and external criticisms of practice by incorporating them and modernizing practice. Rather than wait for clients to come to them, professionals went out into the community promoting community mental health centers. What is significance for the thesis is Castel’s finding that during the interwar and postwar periods psychiatrists gave greater attention to the children of unmarried mothers. Professionals turned their attention to the “normal” and claimed they could instill morality in the home, by working with welfare authorities to reduce aid so as to discourage further illegitimate births, and influence mothers to marry.⁴⁵

Castel shares the view of actor-network theorist Bruno Latour, who described science as politics by other means, arguing we should not view “the new psychiatry... [as] merely an instrument of unmediated political interests;” the significance of cultural changes goes beyond interest politics, which are easier to dismiss.⁴⁶ All of the reforms were undertaken to *modernize* psychiatric practice and resolve internal contradictions, by placing “a new instrument in the hands of the politicians and administrators whose job was to deal with mental illness and, more

⁴³ Françoise Castel, Robert Castel and Anne Lovell, *The Psychiatric Society* (New York, and Guildford, Surrey: Columbia University Press, 1982), 74.

⁴⁴ *Ibid.*, 74.

⁴⁵ *Ibid.*, 75.

⁴⁶ Castel et al, *Psychiatric Society*; 76-77; Bruno Latour, *The Pasteurization of France*. Translated by Alan Sherdan and John Law. Cambridge, MA: Harvard University Press, 1988.

broadly, to control 'problem groups' in the society."⁴⁷ New psychiatric methods "come to be 'recognized' when given 'a social mandate'" and used by "enlightened bureaucrats."⁴⁸ These practical network-building activities help us to understand how medicine expanded beyond its traditional service domain and why the power of medicine remains difficult to challenge. The success of science depended on "forging alliances" with non-scientists, or to paraphrase Latour, Whelan writes, science works not because it is "true to the world" but because the "world is tinkered with to make science work."⁴⁹

If we only focus on the activities of doctors and scientists it is easy to miss the work of social workers, and other non-scientists, in the building of the socio-technical network. Actor-network theory focuses on how scientists as managers try to get populations to come in line with their projects or goals, in a process called *enrolment*, where links are made with previously unconnected entities. Social worlds theorists (SWAT) apply the theory of enrolment beyond the study of scientists and doctors, arguing they are not the only ones who engage in this work.⁵⁰

Questions about the suitability of children for adoption were addressed in professional and popular journals, illustrating on one hand the growing cultural authority of physicians, and the expansion of psychiatric expertise. In 1937, findings from a survey of thirty psychiatrists were published in the *American Journal of*

⁴⁷ Castel et al, *Psychiatric Society*, 76.

⁴⁸ *Ibid.*, 77.

⁴⁹ Emma Whelan, "'Well Now, Who's the Doctor Here?'" Boundary-Work and Transgression in Patient and Expert Knowledges of Endometriosis." PhD diss., Carleton University, 2000), 40; Latour, *The Pasteurization of France*.

⁵⁰ Whelan, 40-43; Susan Leigh Star, "The Sociology of the Invisible: The Primacy of Work in the Writings of Anselm Strauss," in *Social Organization and Social Processes: Essays in Honour of Anselm L. Strauss*, ed., David Maines (Hawthorne, New York: Aldine de Gruyter 1983), 265-83.

Orthopsychiatry, addressing “the problem of child adoption.”⁵¹ The study by Dr. Lippman was a follow-up to a study of recommendations from the “Institute for Juvenile Research” regarding minimum standards of adoptability.⁵² The new study included questions about the predictability and heritability of conditions, including psychosis, feeble-mindedness and the heritability of I.Q. There was still considerable uncertainty and ambivalence within the profession of psychiatry about the influence of heredity, and some doctors emphasized the importance of context when determining “disability” and adoptability, questioning the reliability of psychological tests for infants.

But as Whelan suggested, it is easy to overlook the dialectical nature of the process if we only read the medical literature, ignoring the role of social workers in the “development, spread, and application of scientific knowledge claims.”⁵³ Social workers took their own, and parents’, questions to psychiatrists, asking about the probable inheritance of homosexuality, psychosis, and IQ (e.g. feeble-mindedness) and bringing their own “knowledge to bear in order to align scientists with their own goals and interests.”⁵⁴ Both Wynne and Star emphasize the cooperation and mutuality of “enrolment and the necessity of negotiation of identities and interests in network building.”⁵⁵

⁵¹ H. S. Lippman, “Suitability of the Child for Adoption,” *American Journal of Orthopsychiatry* 270 (1937): 270-273.

⁵² Jenkins, “Adoption Practices and the Physician,” *The Journal of the American Medical Association*, 103 (August 11, 1934): 403-408.

⁵³ Whelan, “Boundary-work and Transgression,” 55.

⁵⁴ *Ibid.*, 56.

⁵⁵ Brian Wynne 1993, 331-32 in Whelan, “Boundary-work and Transgression,” 55.

The overlap with feminist understandings of professions is the starting assumption that actors have no single identity that they betray, but have multiple identities or split selves, that conflict and they have to balance. Instead of thinking of shifting loyalties within a profession, SWAT theorists understand actors as being caught up in different social networks. Social workers, or non-scientists, at times draw on or rely on scientific claims, and at other times they disavow the “worldview and consequences of science.”⁵⁶ This perspective provides an alternative to thinking of social workers as simply misunderstanding or misapplying science.

I suggest that social workers were starting to establish themselves as coordinators of an adoption research network, enrolling psychiatrists by aligning their interests with social practices such as adoption. One of the criticisms of ANT is that researchers ignore the implications of the public role in science, focusing on scientists and not the other way around. As Whelan suggests, they assume that “the identification of allies with the scientist is complete rather than ambivalent and provisional” or the partial enrolment described by Leigh Star.⁵⁷ As I argue, the “problem” of adoption provided psychiatry with a social mandate, just as “psy” discourse was incorporated into social policy, thereby mutually strengthening the network and making the “truth” of psychology harder to refute.

Nurture versus Nature: A Watershed in the History of Adoption

⁵⁶ Ibid., 56.

⁵⁷ Whelan, “Boundary-work and Transgression,” 55-56; Susan Leigh Star, “Power, Technology and the Phenomenology of Conventions: On Being Allergic to Onions,” in *The Sociology of Monsters: Power, Technology & Domination*, ed., John Law (London & New York: Routledge, 1991), 26-56.

The postwar period is recognized as a unique moment in adoption history because the popularity of adoption increased and professional adoptions became the norm.⁵⁸ The demand for adoption grew and “for the first time” the CAS’ in Ontario had more “applicants” than available children.⁵⁹ Historians give two reasons for the increased interest in adoption: the renewed humanism of the postwar period and the fact that adoption practices became scientific.

According to U.S. adoption historians, adoption became more acceptable to the public and social workers because of the rise of environmental discourse over hereditarianism, allowing more children to be considered adoptable. Melosh describes the “new faith” in the “power of nurture over nature” linking the popularity of post WWII adoption to the larger “American commitment to optimism, self-invention, malleability, and faith in social engineering.”⁶⁰ Herman calls it a “peaceful revolution” because the popularity of adoption indicated the defeat of “racial purity ideologies,” with a “decisive turn toward nurture” and a celebration of the “democratic potential of adoption.”⁶¹ Ideas about placing “imperfect children” supposedly changed, and the old view of adoption as “second-rate kinship was weakened” as people explicitly rejected the politics and science of fascism;

the Holocaust and Hitler’s eugenics program made any claim based on the superiority of blood and genes unacceptable. In the place of heredity, Americans embraced the power of the environment and parental love—nurture was believed to be

⁵⁸ Wayne E. Carp and Anna. Leon-Guerrero, “When in Doubt, Count: World War II as a Watershed in the History of Adoption,” in *Adoption in America: Historical Perspectives*, ed. Wayne E. Carp (Ann Arbor: University of Michigan Press, 2002), 181-217.

⁵⁹ Guyatt, “Adoptions in Ontario,” 13.

⁶⁰ Melosh quoted in Karen Balcom, “Constructing Families, Creating Mothers: Gender, Family, State and Nation in the History of Child Adoption.” *Journal of Women's History* 18, no. 1 (2006): 221.

⁶¹ Herman, “Paradoxical Rationalization,” 362.

more powerful than nature. In an era of pronatalism, optimism, and prosperity, the stigma of adoption waned as tens of thousands of couples looked favorably on adoption as a solution to childlessness.⁶²

The adjustment of adopted children also provided medical experts with evidence to distance them from the science of eugenics and embrace “psychiatry and mental hygiene.”⁶³ In Ontario, mainstream social work literature incorporated findings from psychoanalysis, psychiatry and psychology, transforming adoption practice. Public adoption agencies claimed they could deliver “healthy children” to parents if they were patient and willing to go through “a little red tape.”⁶⁴ Popular magazines in Canada boasted about the “mushrooming” of adoptions in Canada, drawing on the revolutionary, scientific image of the H-bomb.⁶⁵ Other writers described greater public confidence because adoption became “an exact social science” in which the child appeared as if born to a couple;

adopting parents are given a child so suited to them physically and temperamentally that they can almost forget he is not their own. And more important that this, they can be sure their new family life will be protected.⁶⁶

By the same token, Karen Balcom argues that the surge in popularity was confined to Protestant CAS within Canada, and the experience of social workers differed in Quebec because of the powerful influence of the Catholic Church and the

⁶² Carp and Leon-Guerrero, “When in Doubt, Count,” 200-201; Herman, “Paradoxical Rationalization,” 362.

⁶³ Carp, *Family Matters*, 27.

⁶⁴ Nora Francis Henderson, 1948 (AO) OACAS Files; Herman, “Paradoxical Rationalization,” 361.

⁶⁵ Earl, “Adoptions Soar In Canada,” (1949): 2.

⁶⁶ Ruth Spielberg, “Dollars and Adoptions,” *Saturday Night* (Nov.29, 1952);

negative cultural association of “Protestantism” with public agencies.⁶⁷ I found evidence that Protestant agencies in Ontario had a harder time placing Catholic children (particularly males), and they were classified as “handicapped” because of religion.⁶⁸ Despite debates about the popularity of adoption being confined to Protestant agencies in Ontario, historians do not dispute the pervasiveness of market discourse in adoption.⁶⁹ This fact gives rise to a couple of questions. Firstly, how did market discourse differ from the hereditarianism of the past? Secondly, to what extent did consumer rhetoric undermine or shape social work strategies of professionalization?

According to statistics from the Department of Welfare, the number of adoptions recorded in Ontario increased by 42% between 1940 and 1953.⁷⁰ In 1944, an article in the *Globe & Mail*, with the caption “Supply Can’t Meet Demand in Babies for Adoption,” included highlights from a speech made by the Deputy Minister of Welfare, William Heise. The consumerist ethos of the period and its influence on the development and administration of welfare policy was reflected in the minister’s use of market tropes. He described adoption as a “bull

⁶⁷ Karen Balcom, *The Traffic In Babies: Cross-Border Adoption and the Baby-Selling between the United States and Canada, 1930-1972* (University of Toronto Press: Toronto, Buffalo, London, 2011).

⁶⁸ OACAS “A Study of the Disposition of Permanent Wards as of October 1st, 1959,” (OA) RG 29 Files; Frances MacKinnon. “The Adoption of Children With Handicaps,” (MTA) CAS fonds. There were fewer Catholic adoptive applicants, in general, even though Catholic authorities had formal standing in the development of provincial adoption regulations. Religion and race continued to be a dominant factors in the placement of Catholic children, because officially, they could only be placed with Catholic families, though exceptions were made.

⁶⁹ Shurlee Swain, “Market Forces: Defining the Adoptable Child, 1860-1940.” *Social Policy and Society* (2012) 11:3, 399-414; Ellen Herman, *Kinship by Design: A History of Adoption in the Modern United States* (Chicago and London, University of Chicago Press, 2008); Gail Aitken, “Critical Compromises in Ontario’s Child Welfare Policy”, in Jacqueline S. Ismail, ed., *The Canadian Welfare State: Evolution and Transition* (Edmonton: University of Alberta Press 1987), 274-299.

⁷⁰ Department of Welfare. *Annual Report*. 1955.

market...[T]here are far more childless couples wanting babies than there are babies. In Toronto alone, for instance, there's a waiting list now of more than 300."⁷¹ He reassured the public that the long waiting list was proof that there was greater confidence in the system of adoption: "our greatest problem, if you can call it that, is supply."⁷²

The deputy minister did not hesitate to joke that "like gentlemen, most foster-parents prefer blonds" and girls; "[F]air-haired, blue-eyed girls' are the stipulation on far and away the majority of applications" though he did not "pretend to know the reasons" why.⁷³ In the same *Globe & Mail* article, one adoption worker explained the gender preference of foster-parents by further relying on gender stereotypes, saying girls were "most likely to remain with [parents] or near them when grown and thus give comfort in old age."⁷⁴ Social workers drew on the same market analogy, describing the reversal of the "supply-demand" trend, as something "out there" without acknowledging their own ambivalence in adoption. They claimed that as recently as the 1930s and 1940s couples were fearful of adopting strangers, but this had changed; "[B]y the end of the forties, there were more than twice as many seeking to adopt than there were children available for adoption."⁷⁵

⁷¹ "Supply Can't Meet Demand in Babies for Adoption." *Globe and Mail* Dec. 12, 1944 (MTA) CAS fonds 1001 Series 541

⁷² Ibid.

⁷³ Ibid.

⁷⁴ Ibid.

⁷⁵ Nichols is quoted in Guyatt, "Adoptions in Ontario," [].

When applied to adoption, the logic of the market created equivalencies between the value of children (as investment) and the value of potential adoptive parents (or consumers),

We attempt...to fit the child into a home that is suited to it, based on its physical and mental background. It's a delicate task. A child whose background indicates that it will be able to grow up and benefit by a university education must be placed in a home that is likely to make that education possible. A child must have love and affection but it must also have opportunity. That is our aim.⁷⁶

The deputy minister's comments reflected the government's tacit approval of the "matching" paradigm, the first standard in adoption, as well as popular understandings of heredity.⁷⁷

The government's position on adoption and foster-care practices also exposed the contradictions of the liberal welfare state. The provincial government drew on the "best interests of the child" rhetoric to enact protection laws but was still reluctant to take responsibility for children considered mentally or physically "deficient," refusing full citizenship to them and treating them as "defective" products. In the mid-1940s, the Infants Home of Toronto, the CAS, and other welfare organizations raised alarms about overcrowding in institutional homes and the lack of suitable foster homes.⁷⁸ Despite pressure from private and public agencies and organizations, the deputy minister remained adamant that there was no hope of increased provision for these children at that time.⁷⁹

In order to tackle the problem, the Infants' Home of Toronto began to

⁷⁶ "Supply Can't Meet Demand." *Globe and Mail* Dec. 12, 1944 (MTA) CAS fonds 1001 Series 541

⁷⁷ Phillips, "Financially irresponsible," 329-358; Herman, *Kinship by Design*.

⁷⁸ Minutes of Board of Managers (1930-1951) January 1946 (MTA) Infants' Home fonds 1404.

⁷⁹ Minutes of Board of Managers, November 1947, May 1948 (MTA) Infants' Home fonds 1404.

advocate the regulation of reproduction and pregnancy through eugenic solutions. The “Health League [urged] the Board to ask their members of the Provincial parliament to support the principle of compulsory medical examination before marriage.”⁸⁰ The discussion was borne out of frustration, because the agency could not get clear answers as to whether the Province or local agency was responsible for taking care of mentally deficient or “gross physically abnormal” children, sparked by the case of a “Mongolian idiot child”[sic] whose foster mother refused to care for him any longer.⁸¹

The social worker responsible for the child met with the deputy minister of health for Ontario and was unable to get assistance.⁸²The president of the Infants’ Home then met with the deputy minister and insisted that if the province did not provide immediate aid, they would take the matter to Ottawa. The minister of health agreed to move the child to an institution in Orillia, on the condition that the Infants’ Home workers accept a three-month old “idiot” child from Mt. Sinai Hospital, as a “trade.”⁸³

Local organizations, such as the United Welfare Chest, became more involved and agencies pressed legislators to open another residential school for

⁸⁰ Minutes of Board of Managers Minutes (1930-1951) January 1946 (MTA) Infants’ Home fonds 1404 Series 855, File #5

⁸¹ Ibid.

⁸² The social worker, Miss Carver, interviewed the Minister of Health, Dr. Phair. Recently a class-action suit in Ontario was settled, involving developmentally disabled children who were institutionalized and abused. See:

⁸³ Minutes of Board of Managers, Minutes (1930-1951) January, 1946, (MTA) Infants Home fonds 1404 Series 855, File#5. Mrs. Baxter was appointed as chair to discuss this problem with the Minister, Dr. Phair.

mental defectives, similar to the one in Orillia.⁸⁴ Those who worked in the Infants' Home believed the care of children was a provincial responsibility and the costs should not be borne by them through Community Chest funds. Some workers suggested that children would be better cared for in their own homes because of overcrowding in the agency homes. The deputy minister and medical experts supported the general goal of greater institutional care, and agreed to bring it to the government and cabinet ministers through personal discussions.⁸⁵ In the short term, the Infants' Home amended their policy to refuse to admit children with gross physical deformities, informing relevant agencies that these children were now unsuitable for foster care.⁸⁶ There was still a division of responsibility between them and the CAS, based on the age of children in care.⁸⁷

As a result of the impasse between the province and Infants' Homes, stronger links were formed between social workers and mental hygiene services.⁸⁸ The new director of the CAS warned that many types of children coming into care should not be their responsibility, because they made it difficult to care for current children. The CAS planned a careful study of all children in their care, to find other facilities, and solicit feedback from professionals and officials responsible for children.⁸⁹ Later that year, they joined forces with the Infants' Homes to compel the Province to take

⁸⁴ Minutes of Board of Managers, February 1946 (MTA) Infants Home fonds 1404 Series 855, File#5

⁸⁵ Minutes of Board of Managers, June, 1946 (MTA) Infants Home fonds 1404 Series 855, File #5.

⁸⁶ Minutes of Board of Managers, September 1947 (MTA) fonds 1404 Series 855, File #5.

⁸⁷ Minutes of Board of Managers, October 1947 (MTA) fonds 1404 Series 855, File #5.

⁸⁸ Minutes of Board of Managers, September 1947 (MTA) fonds 1404 Series 855, File #5.

⁸⁹ Steward Sutton, Director CAS, "Draft Proposal As a Basis for Discussion with a View to Determining a Solution to the Shelter's Problem": November 27, 1947 (MTA) CAS fonds 1001; Minutes of Board of Managers, December 1948 (MTA) Infants Home fonds 1404 Series 855. They were to solicit input from deputy ministers, the provincial health minister, those involved in welfare and reform institutions, the director of psychiatric hospitals, and any others involved with children.

responsibility for “imbecile” children. In January 1949, provincial officials agreed that a new hospital would be built in Smith Falls. For the time being, a hospital with 300 beds would open near Aurora, and the government would implement a temporary scheme to increase payments to foster parents.⁹⁰

The Postwar Social Context and Growth of Psychology

Numerous feminist scholars have demonstrated that an ideology of *familialism* dominated the postwar period, as the family became the source and solution to many social problems.⁹¹ As Adams showed, in Canada, ideal nuclear families were promoted through popular culture and school board curriculums “as the first line of defense against the perceived insecurity of the Cold War years.”⁹² In their histories of the postwar period, U.S. writers May and Breines connected the fortification of the nuclear family to a generalized “culture of containment,” and a “defense of masculinity and whiteness” because of the perceived loss of power by dominant groups.⁹³

Coldwar rhetoric tied familialism to modern capitalism, portraying capitalism as a superior system to socialism, and warning that “reds,” subversives and homosexuals, were all threats to the family and North American way of life.

⁹⁰ Minutes of Board of Managers, “Business Arising--Imbecile Children” January 1949 (MTA) Infants Home fonds 1404, File #6.

⁹¹ Wini Breines, *Young, White and Miserable*, (Beacon Press: Boston, 1992); Elaine T. May *Homeward Bound: American Families in the Cold War Era*, (Harper Collins: U.S., 1988); Mary Louise Adams *The Trouble With Normal: Postwar Youth and the Making of Heterosexuality* (Toronto: University of Toronto Press, 1997).

⁹² Adams, *Trouble With Normal*.

⁹³ Breines *Young, White and Miserable*, 8-11; May, *Homeward Bound*; Adams, *Trouble With Normal*, 71. These scholars examined popular magazines, films, and public education campaigns.

Nuclear families, living in newly constructed suburbs, were celebrated as consumers who could salvage the postwar economy, which had changed from a mostly manufacturing to a service economy.⁹⁴

Sociologists also contributed to a moral panic about the “crisis in the family” by providing functionalist explanations that described a need for conformity after the war to protect national culture.⁹⁵ Social anxieties about men returning from overseas, and finding themselves out of work, led to state attempts to push women back into the home, voluntarily or through gendered social policies.⁹⁶ Gender roles had been blurred during the war years as more women entered the labour force, in “non-traditional” jobs, as part of their national duty.⁹⁷ Popular magazines and scholarly journals described a crisis of masculinity and femininity, using examples of “too much mothering” and “father deficiency,” to making associations with perceived social threats.⁹⁸ Gender confusion was correlated with a host of social problems such as juvenile delinquency, infertility, illegitimacy, and an overall decline in morality.

Government officials, policy-makers, and social workers made associations between the perceived increase in juvenile delinquency and more mothers working outside the home. Yet in Ontario, government records indicate that the problem of “servicemen” deserting their wives only worsened after the war, because many men

⁹⁴ Adams, *Trouble With Normal*, 59.

⁹⁵ David Reisman, *The Lonely Crowd* (Connecticut: Yale University, 1950); John R. Seeley, R. Alexander Sim, Elizabeth W. Loosely, *Crestwood Heights* (Toronto: University of Toronto Press, 1956), 165-167.

⁹⁶ Alvin Finkel, *Social Policy and Practice in Canada: A History* (Waterloo, Wilfrid Laurier Press, 2006), 142-43.

⁹⁷ Ruth Roach Pierson, *They're Still Women Afterall* (McClelland and Stewart: Toronto, 1990).

⁹⁸ Adams, *Trouble With Normal*, 71; John Nash, “It’s time father got back in the family,” *MacLean’s* 69, no.10 (1956): 28-29; Eric Hutton “The Future of the Family,” *MacLean’s* 26 (1956):12-14.

had trouble adjusting to “normal” life at home.⁹⁹ A survey conducted by the Ministry of Public Welfare in Ontario, in 1950, listed the ongoing problems of desertion by men and irregular employment as areas of concern.¹⁰⁰

During this period, the idealized construction of the “home...[and] happy united family” became the “social foundation and metaphorical microcosm of Canadian nationhood.”¹⁰¹ State policies in Canada reflected emerging psychological perspectives, seen in the lack of funding for childcare, social assistance and housing, even though women’s own activities after the war did not.¹⁰² Welfare historians suggest that Canadian social policy remained more committed to “free-enterprise” than a serious redistribution of wealth.¹⁰³ Finkel and Gözl, for example, describe the postponement of progressive social welfare reforms and a growing conservatism that shaped postwar Canada, as marital and family relations were reconfigured with a particular middle-class, British Anglo-Saxon bias, shown in the limited number and kind of social policies that were implemented. Scientific theories about normal child development coincided with a prescriptive maternal role that was child-centered, and women’s social position was equated with heterosexual, married motherhood.¹⁰⁴

⁹⁹ Registrar General of Ontario, *Annual Report 1955*, no.19, p.14

¹⁰⁰ “Surveys,” Deputy Minister’s Files, (AO) RG 29-01-411.

¹⁰¹ Annalee Gözl “Family Matters: The Canadian Family and the State in the Postwar Period.” *Left History* 1, no. 2 (1993): 9-49.

¹⁰² Finkel, *Social Policy and Practice in Canada*, 142-43. Finkel showed, the government was in favour of the more popular Veteran’s Assistance Program and limited Baby Bonus. See also: Pierson, *They’re Still Women Afterall*.

¹⁰³ Finkel, *Social Policy and Practice in Canada*, 143-44.

¹⁰⁴ Cathy Urwin “Constructing Motherhood: The Persuasion of Normal Development,” in *Language, Gender and Childhood*, ed. Catherine Steedman, Cathy Urwin, and Valerie Walkerdine (London: Routledge, 1985), 164-202.

Compared to their parents, the standard of living did rise for many people in the 1950s, but for countless others it remained an intangible ideal. Feminist historians assert that the move to the suburbs represented a return to the ideology of separate spheres, as daycare programs were cancelled overnight and many women were pressured to give up paid labour.¹⁰⁵ In spite of the dominant ideologies and discourses, Korinek's research challenges any assumptions we might have about the "homogeneity" of the period, uncovering signs of resistance and rebellion from women (e.g. in letters to magazine editors).¹⁰⁶

According to Gözl, the retreat to the domestic sphere did not reflect the same old "haven in a heartless world" rhetoric, characteristic of the past. The new discourse of familialism incorporated the language of "egalitarianism," or "familial democracy in childrearing" and "equal partnering," even though gender [and other social] relations were not radically altered.¹⁰⁷ The government withdrew childcare and tax incentives for working mothers, while paradoxically describing women and mothers as "national assets" and "part of the team."¹⁰⁸ But as Valverde points out, the state is not the only agent of history.

Social workers also hid behind an egalitarian ideal, says Epstein, as they collaborated with other helping professions to "manage the population" through normalization practices.¹⁰⁹ Iacovetta argues that as immigration patterns shifted and

¹⁰⁵ Pierson *They're Still Women Aferall*; Strong-Boag, "Home Dreams"; Susan Prentice, "Workers, Mothers, Reds: Toronto's Postwar Daycare Fight," *Studies in Political Economy* 30 (1989): 115-141.

¹⁰⁶ Valerie Korinek, *Roughing it in the Suburbs: Reading Chatelaine Magazine in the Fifties and Sixties* (Toronto: University of Toronto Press, 2000).

¹⁰⁷ Gözl "Family Matters, 9-49.

¹⁰⁸ Gözl "Family Matters, 9-49.

¹⁰⁹ Epstein, "Culture of Social Work," 8.

individuals from non Western European countries began to enter Canada in greater numbers, helping professions such as social work took on the added "process of Canadianization."¹¹⁰ This was based on the rationalization that the more "patriarchal, authoritarian" families from Eastern and Southern Europe needed help transforming themselves into "modern, democratic, North American families," and was also an attempt to ward off the threat of socialism.¹¹¹

Mona Gleason showed how psychological experts gained a "foothold" in Canadian society at this time, because of the child-centered focus of the period. Psychology's prescription was that Canadians develop normal personalities, and parents and teachers were instructed in how to cultivate this in their children in order to avoid the risk of producing "mentally unhygienic future citizens."¹¹² The most visible expansion of psychology was in schools and social welfare institutions such as the CAS. The relationship between psychological expertise and normalizing processes was evident in how the ideal family was defined. The ideal family reflected "Anglo/Celtic (as opposed to 'ethnic') middle-class, heterosexual, and patriarchal values," constituting all others as "poorly adjusted."¹¹³ Psychologists were not alone, however. The desire to assist the family came from an "army of human

¹¹⁰ Franca Iacovetta "Making 'New Canadians': Social Workers, Women, and the Reshaping of Immigrant Families," in *Gender Conflicts*, ed. Franca Iacovetta and Mariana Valverde (Toronto: University of Toronto Press, 1992), 261-303.

¹¹¹ Mona Gleason, *Normalizing the Ideal: Psychology, School, and the Family in Postwar Canada*. (University of Toronto Press: Toronto, Buffalo, London, 1999), 7.

¹¹² Gleason, *Normalizing the Ideal*, 17

¹¹³ *Ibid.*, 5-6

relations experts, including sociologists, social workers and marriage counselors” all of whom offered to help Canadians cope with change.¹¹⁴

Nikolas Rose has underlined the social significance of the twentieth century's proliferation of experts of human conduct, stating “[T]hese experts ... have acquired special authority in practices that not only try to order human affairs to minimize miseries, risks and dangers, resolve conflicts, but also claim to help us achieve individual and collective security, health, welfare, wealth and even happiness.”¹¹⁵ The discourse of mental health became a public health issue and the basis for new programs in education and prevention. He argues that the growth of psychiatric expertise moved outside the “asylum” to transform everyone’s experience and all phases of life.¹¹⁶

Epstein defines the increased attention to mental and psychological health, particularly within social agencies, as the rise of the “therapeutic state.” She believes social workers slowly gave up on poverty to focus on “personalities” and “psyches,” considered more “malleable” than a “wage structure.”¹¹⁷ Laura Curran captures a similar turn with the rise of “therapeutic maternalism” in social work, a blending of liberal feminism and maternalism, as psychological language was integrated “into the discourse on state support for women’s and children’s welfare.”¹¹⁸ Likewise, Fraser and Gordon argue that within liberal welfare discourse dependency was recast

¹¹⁴ Ibid., 5-6.

¹¹⁵ Nikolas Rose, "Expertise and the Government of Conduct." *Studies in Law, Politics and Society*. 14 (1994): 359.

¹¹⁶ Nikolas Rose, "Psychiatry: the discipline of mental health," in *The Power of Psychiatry*, ed., Peter Miller and Nikolas Rose (Oxford: Blackwell, 1985), 43-53.

¹¹⁷ Epstein "Therapeutic Idea," 3-18.

¹¹⁸ Laura Curran, "Social Work's Revised Maternalism: Mothers, Workers and Welfare in Early Cold War America," *Journal of Women's History* 17, no.1 (2005): 121.

in psychological and moral terms, posing numerous contradictions for social workers. Unemployment was no longer viewed as “laziness or immorality,” but as a possible symptom of psychological illness; however, there were gender, ethnic and class contradictions. Popular understandings of Bowlby’s research on “attachment disorders” provided more fodder for mother-blaming tendencies, as childhood difficulties and delinquency were attributed to maternal employment.¹¹⁹ Some U.S. social workers drew on the same psychiatric logic to argue that employment was good for the psychological well-being of mothers and children.¹²⁰ But the degree to which social workers’ accepted maternal employment was qualified: mothers still had to put their children’s needs first, but the way this was defined depended on a mother’s marital status and class position.

Even though there was little evidence to support the perception that illegitimacy rates were increasing after the war, social agencies helped to produce fears about the fragility of the nuclear family.¹²¹ Social workers drew on the discourse of mental health and claimed that given the opportunity to provide skilled casework in adoption, they could improve public health and social security by helping unwed mothers to relinquish their children and release their feelings of guilt.¹²²

¹¹⁹ Curran, “Social Work’s Revised Maternalism,” 121; Fraser and Gordon, “A Genealogy of Dependency” :Tracing a Keyword of the U.S. Welfare State.” *Signs: Journal of Women in Culture and Society* 19, no. 2 (1994): 319-328.

¹²⁰ Curran, “Social Work’s Revised Maternalism,” 121.

¹²¹ Margaret Little, “ The Blurring of Boundaries: Private and Public Welfare for Single Mothers in Ontario.” *Studies in Political Economy*, 47 (1995): 89-109.

¹²² “A Study of the Adjustment of Unmarried Mothers,” Conducted by the Toronto Welfare Council (TWC) (1943) 5-6, (MTA) CAS fonds 1001, Series 537.

The Growth of Expertise and the Rise of the Therapeutic State

The education of mothers and teachers had been key to the state's support for the expanding fields of medicine, psychology, and psychiatry, fields that were dominated by white, European men.¹²³ The most public example of the growing role of the province in child protection, and the symbolic importance of children, was the 1934 case of the Dionne quintuplets, who were separated from their family and put on display as Ontario's largest tourist attraction, under the care of Dr. Roy Dafoe and Dr. William Blatz.¹²⁴ The province passed the Dionne Quintuplets Guardianship Act in 1935, making the Minister of Public Welfare their special guardian and the children wards of the state until they were eighteen.¹²⁵

What remains significant for the current project is how the separation of the "Quints" from their family provided a chance to test the new theories of child development and scientific childrearing in a nursery/laboratory. In massive public education campaigns, progressive childrearing was posed against what most parents and teachers did.¹²⁶ Dr. Blatz gained legal responsibility for the Quints from the Province and set out to "translate" research findings to lay audiences through

¹²³ Gleason, *Normalizing the Ideal*.

¹²⁴ Dr. Dafoe was a local family physician and Dr. Blatz was a psychologist from the University of Toronto. John McCullagh, *A Legacy of Caring: A History of the Children's Aid Society of Toronto*, Dehli, "Fictions of the scientific imagination," 1.

¹²⁵ The irony is the act was motivated by public outcry after the children's father signed an agreement to exhibit the girls at the Chicago World Fair, to help support an already large family. The province challenged his authority then facilitated the exhibition of the children, attracting over three million paying visitors to North Bay, during the height of the depression.

<http://www.habicurious.com/tag/the-dionne-quintuplet-guardianship-act-of-1935/> Retrieved October 24th, 2015. See also: Strong-Boag, "Intruders into the Nursery."

¹²⁶ Dehli, "Fictions of the scientific imagination," 4; Alexandra Minna Stern, "Better Babies Contests at the Indiana State Fair: Child Health, Scientific Motherhood, and Eugenics, 1920-35," in *Formative Years: Children's Health in the United States, 1880-2000*, ed. Alexandra Minna Stern and Howard Markel (Ann Arbor: Michigan University, 2002), 121-152.

popular magazines, playing a key role “in the formation of a pervasive discourse of normal child development in Canada.”¹²⁷

At the same time, his investigation of so-called “natural” development theories was full of contradictions because the girls were confined to the nursery and closely monitored by nurses: a model of child-rearing unattainable to most people.¹²⁸ Though the advice was geared to middle-class mothers and child-care workers, the goal was to turn every mother into a “trained expert” by relying on psychological knowledge and scientific reason.¹²⁹ Efforts to promote scientific motherhood were undertaken by emerging specializations, like pediatricians, who tried to shift the cultural preference from cherubic beauty ideals to scientific ones, in demonstrations that measured growth and stages of development, things invisible to the untrained eye.¹³⁰

One of the guiding assumptions of medical and psychological research was that parents were “unreliable witnesses” to their own child’s development. As Dehli explains, the Dionne’s provided a “perfect” research laboratory from which to build an academic discipline. Everything the girls did was scheduled and monitored, and visual evidence was provided to show their “distinctive personalities.”¹³¹ The concept of “personality” was given form, as researchers emphasized and measured the differences between the girls’ “reaction[s] to the regulation of social and cultural

¹²⁷ Dehli, “Fictions of the scientific imagination,” 3.

¹²⁸ Dehli, “Fictions of the scientific imagination,” 4. The model was highly gendered, contradictory, and inconsistent. The same points are made by D. Dodd who counted the hours of “motherwork” in Dr. MacMurchy’s *Blue Books*; 14 hours of work were supposed to fit into an 8 hour day (as mothers were also supposed to play). Again, the focus on experts “occluded” the labour of women, says Dehli.

¹²⁹ Dehli, “Fictions of the scientific imagination,” 4.

¹³⁰ Stern, “Better Babies Contests,” 121-152.

¹³¹ Dehli, “Fictions of the scientific imagination,” 7; Stern, “Better Babies Contests.”

environment” and interpreted it as evidence of “inherent personalities” based on whether they accepted [regulation] or not.¹³² But as critics noted, in their observations researchers used non-scientific “social” terms to describe the girls and had to work hard to demonstrate personality differences, using markers that seemed arbitrary to the general public, who could not see the differences.¹³³

Dehli contends that the “fiction” of science is that some things are brought into view rather than others, and the question we need to ask is: which things?¹³⁴ Entities such as “personality” were constituted through the actions of nurses and doctors in the laboratory, as “progressive psychologists and nurses constituted the categories they claimed to discover in children.”¹³⁵ Like science studies, disability, and feminist theorists, she shows how the “interpretive act of perception” works to constitute bodies as impaired or disordered by relying on pre-existing social categories and values.¹³⁶

Scientific methods of observation are embedded in complex power relations, and notions of “normalcy” are produced through practices that are themselves socially embedded. Despite controversy about the scientific “fact” of personality, the concept of personality gained autonomy and moved beyond the lab and the psychological community through the cooperation of state agencies, social workers

¹³² Ibid., 8.

¹³³ Dehli describes disagreements between psychologists and geneticists about the value of “mental testing.” University of Toronto geneticist Horatio Newman argued, too much was being made of environment. He worked with Blatz and was an advisor to the biologist Norma Ford Walker, who served as consultant to the CAS adoption department on medical genetics--discussed in chapter five.

¹³⁴ Dehli, “Fictions of the scientific imagination,” 4.

¹³⁵ Ibid., 12.

¹³⁶ Bill Hughes, “The Constitution of Impairment: modernity and the aesthetic of oppression.” *Disability and Society* 14, no. 2 (March 1999): 155-172.

and popular writers. From an actor-network perspective, “scientific facts must be consistently applied in order to work, but they do not work in just any reality...only in a particularly constituted one.”¹³⁷

Social workers aligned themselves with psychology, but they also enrolled psychologists in an adoption network, providing social relevance for research in psychology. The concept of personality as a category was used to determine a child’s adoptability and make placements. As a “cautionary tale,” the case of the Dionne family shows how the growth of expertise and a scientific model of university affiliated research played a role in new forms of regulation and intervention into family life.¹³⁸ Funding from the Rockefeller Foundation and Mutual Life Insurance aided in the circulation of new theories and objects as part of an “interdisciplinary ethos.”¹³⁹ These affiliations changed and were changed by social work, as professional education increasingly became linked to the university in Canada and attempts were made to provide a scientific basis for social work.¹⁴⁰

The American psychologist Arnold Gesell tried to forge alliances between psychology and social work through his work in scientific adoption and social workers forged working relations with him. Gesell worked with federal and local agencies, wrote pamphlets, articles in the CWLA bulletin, and pushed for standards to avoid what he called “bungled adoptions,” in articles such as: “Psychological

¹³⁷ Whelan, “Boundary-work and Transgression,” 40.

¹³⁸ Ian Mackay, “Why Tell This Parable? Some Ethical Reflections on the Dionne Quintuplets,” *Journal of Canadian Studies* 29, no.4 (1994): 144-152.

¹³⁹ Lily Kay, *The Molecular Vision of Life: Caltech, the Rockefeller Foundation and the Rise of the New Biology* (New York, Oxford University Press, 1993).

¹⁴⁰ Ken Moffatt, *A Poetics of Social Work: Personal Agency and Social Transformation in Canada, 1920-1939* (Toronto, University of Toronto Press, 2001). Moffatt describes conflict between social work leaders who supported versus resisted the trend toward “scientization.”

Tests Important in Preventing Unsuitable Adoptions” and “Lack of Mental Tests Result in Parents’ Adopting a Defective Child.”¹⁴¹ Social work experts from the Gesell Institute travelled to Ontario to lead adoption workshops, and resources from the Institute were widely distributed. By 1957, ten years after he retired, the mental tests Gesell pioneered were standard practice in adoption, and his writings were recommended reading within the CAS, promoted in staff bulletins.

The focus on psychological health was geared toward the “child” in society, and mothers and children were subject to a battery of tests in order to predict the likelihood of normal development.¹⁴² Child psychologists in the mental hygiene clinic of the Toronto CAS studied all children coming into the society before they could be placed in appropriately matched homes. Described as the busiest clinic in Canada, all children coming into the society were tested as early as five weeks old, drawing on Gesell’s criteria; “[W]ith a two-month old child, one of the tests used is whether it can smile [normally].”¹⁴³

Social workers argued that the new child-centered focus in psychology had changed the goals of adoption. Adoption was defined as providing “the security of a loving parent-child relationship, formed during the entirely dependent period of their lives” in infancy:

During the nineteenth century adoption primarily served the purpose of obtaining an heir for an individual or a family. During the

¹⁴¹ Herman, “Paradoxical Rationalization,” 352.

¹⁴² Patti Phillips, “Financially irresponsible and obviously neurotic need not apply”: Social Work, Parental Fitness, and the Production of Adoptive Families in Ontario, 1940-1965,” *Histoire sociale/Social History* 39 (78) 2006: 329-358.

¹⁴³ “Psychological Study Said Aid in Early Adoptions” in *Toronto Daily Star*, December 32, (1952): 32. Donna Varga, “LOOK -- NORMAL: The Colonized Child of Developmental Science,” *History of Psychology* 14, no. 2 (2011):137-139.

twentieth century, adoption has been increasingly guided by the idea of providing a family for a child who has been deprived of his own family.¹⁴⁴

The new mantra was “homes for children” rather than the previous emphasis on finding “children for homes.” Psychological findings were used to reform adoption and foster-care practices, with improvements meant to provide children with a more continuous relationship, in the same home, with a “warm, mother-like figure.”¹⁴⁵

Social workers frequently cited and helped to popularize the widely publicized research of psychiatrist Dr. John Bowlby as an influence in adoption because he emphasized the value of early home-life for the family and child.¹⁴⁶ He and other physicians argued that the lack of daily mothering in the early years and an increase in the number of “broken homes” caused permanent personality defects.¹⁴⁷ One M.D. attributed the child’s ability to withstand racism to early bonding with the mother, maintaining that social “pathological” problems experienced by “social minority” groups were due to the lack of an adequate parent-child relationship.¹⁴⁸ One doctor, alluding to the failed Dionne experiment, argued that not even

¹⁴⁴ Anne marie Grebber, “Adoption in European Countries,” *Child Welfare* quoted in Doris Guyatt, “Adoptions in Ontario,” *Ontario Association of Children Aid Societies Journal* 10, no. 9 (1967).

¹⁴⁵ Speers "Adoption is for Children Who Need Parents,"2; (AO) RG 29-1 Deputy Minister Files; RG 29-107 "Report of the Ad Hoc Committee on Retention of Adoption Records."

¹⁴⁶ John Bowlby “Substitute Families: Adoption.” *Maternal Care and Mental Health* (World Health Organization) in *Readings in Adoption* ed. Evelyn Smith (New York: Philosophical Library, 1963 [1951]), 434-442.

¹⁴⁷ Speers "Adoption is for Children Who Need Parents,"2; Bowlby “Substitute Families: Adoption,” 434-442.

¹⁴⁸ Laretta Bender, M.D. “There is No Substitute for Family Life.” *Child Study*. (Reprinted for the Federal Security Agency, Social Security Administration and the U. S. Children’s Bureau (USCB), 1946 (MTA) File 819 OACAS records.

routinized, scientific child-rearing by nurses in “model” institutions could offer a replacement to early, daily mothering.¹⁴⁹

Social workers who promoted scientific adoption claimed to be buoyed by early 20th century research on child welfare and “strides made in other professions, notably those of medicine, psychiatry and psychology.”¹⁵⁰ Occupational leaders tried to persuade members within the profession that for all but the “irreparably damaged” child, a “home of his own was an essential condition for his optimum development.”¹⁵¹ Adoption was presented as a “win-win” situation. On one hand, there were children deprived of the security of living with their natural parents, who could benefit from the “substitute” adoptive home (or foster home where adoption was not desirable) and on the other hand were adults “deprived” of “natural children of their own.”¹⁵² Professional journals and popular magazine articles emphasized the importance of “establishing roots in a permanent home.”¹⁵³ There seemed to be little recognition of that fact that child-centered approaches depended on a “minimum level of material security,” a factor that Urwin points out was used against poor women.¹⁵⁴

In an adoption pamphlet distributed by the OACAS after the war, called *The Citizen of Tomorrow*, one of the reasons social workers gave for rejecting a couple for adoption was that “the would-be adoptive mother was too busy with outside

¹⁴⁹ Ibid.

¹⁵⁰ Mary Fairweather, *Adoption Institute* (Toronto, 1952), 5 (MTA) CAS fonds 1001. Series 536,

¹⁵¹ Ibid.

¹⁵² Ibid., 6.

¹⁵³ Speers, “Adoption is for Children Who Need Parents”; Marjorie Earl “Adoptions Soar in Canada,” *Star Weekly* (January 8th, 1949): 2.

¹⁵⁴ Urwin, 1985: 166

interests to give the child adequate care.”¹⁵⁵ Even though many social workers recognized the demands of the double day, and rejected punitive policies for working mothers, many also believed that “low-income women needed the guidance of middle-class professionals.”¹⁵⁶ Debates about “working” mothers were spurred on by conservative critics and given further support by the maternal deprivation theories of experts like John Bowlby and Harry Harlow, contributing to a discourse of “mother-blaming.”¹⁵⁷ Within social work, *dependency* was redefined in psychological terms and resources were largely directed to “individualized casework” rather than improving the structural conditions of working women’s lives, and acknowledging the economic dependency of all individuals under capitalism.¹⁵⁸ During this period, social workers were “instrumental in turning therapy into social policy,” and as Epstein suggests, the profession did it by drawing on the ideology of individualism--*keep trying you can do it*-- and the “American Dream,” to help Canadians deal with social change.¹⁵⁹

The Discourse of Unwed Motherhood: Change and Continuity

“[P]rorogation can be seen as a reflection of the *decay* of Parliament’s relevance that has been taking place over the last generation.”¹⁶⁰

If Britain is the mother of Parliaments, her Canadian daughter is a *fallen woman*.

John Ibbitson *Globe and Mail*, January 2010

¹⁵⁵ “Adoption Procedure” in: *The Citizen of Tomorrow* OACAS (1946): 29, (AO) RG29 Files.

¹⁵⁶ Curran, “Social Work’s Revised Maternalism,” 127.

¹⁵⁷ Nancy Pottishman Weiss, “Mother, the Invention of Necessity: Dr. Benjamin Spock’s Baby and Child Care,” Special Issue: Reassessing Twentieth Century Documents, *American Quarterly* 29, no. 5 (Winter 1977): 519-546; Glenda Wall, “Moral Constructions of Motherhood in Breastfeeding Discourse.” *Gender and Society* 15, no. 4 (2001): 592-610.

¹⁵⁸ Fraser and Gordon, “Genealogy of Dependency.” On this point also see Curran, “Social Work’s Revised Maternalism,” Margaret H. Little, *No car, no radio, no liquor permit: the moral regulation of single mothers in Ontario, 1920-1997* (Toronto, Oxford University Press, 1998).

¹⁵⁹ Epstein, “Culture of Social Work,” 10-11.

¹⁶⁰ Peter Dobell cited by John Ibbitson in *Globe and Mail*, January 2010.

The problem of lone motherhood has been re-constructed many times over the twentieth century but as Ibbitson's quote serves to illustrate the image of the fallen woman is still used to signify moral decay. Historians describe continuities and discontinuities in how the problem of unmarried motherhood was "defined and treated," before and after the postwar II period.¹⁶¹ It also provided a sense of mission:

Evangelical women cited religious calling and female mission, and unmarried mothers claimed the authority of experience. By the early twentieth century, however, social workers invoked the legitimizing rhetoric of science to brand evangelical women's tradition of womanly benevolence sentimental and sloppy, to pronounce unmarried mothers untrustworthy interpreters of their own experience, and to name themselves the rightful authorities over the "social problem" of unmarried motherhood.¹⁶²

After the war, the dominant discourse of never-married motherhood shifted from public health to social work, and eventually social science explanations.¹⁶³ Yet, there is evidence that moral classifications remained an "obsession" within secular as well as religious organizations, well into the 1950s.¹⁶⁴ The Toronto CAS, and social workers, still had to defend themselves against criticisms that they were encouraging immorality by "pampering" unwed mothers.¹⁶⁵ What's more, social distinctions between "worthy" widows and "unworthy" unmarried mothers never really

¹⁶¹ Jane Lewis and John Welshman, "Issue of Never-Married Motherhood in Britain, 1920-70." *Social History of Medicine* 10, no. 3 (1997): 417; Leigh Valliere, "Continuity in the Face of Change: Institutions for unwed mothers in Toronto, 1870s-1930s," (Unpublished MRP, York University, 1993).

¹⁶² Regina Kunzel, *Fallen Women, Problem Girls: Unmarried Mothers and the Professionalization of Social Work, 1890-1945* (New Haven, Conn.: Yale University Press, 1993), 115.

¹⁶³ Lewis and Welshman, "Issue of Never-Married Motherhood," 417.

¹⁶⁴ Lewis and Welshman, "Issue of Never-Married Motherhood," 401-18; Little, *No car, no radio*.

¹⁶⁵ Katherine Sutherland, "Address to Social Planning Council," 1955, (MTA) CAS fonds 1001; Leontine Young, *Out of Wedlock*, Toronto: McGraw-Hill (1954), 11. Young makes the same point as Sister Mechilde, who is quoted in: Ken Lefoih "The Happy Havens of Sister Mechilde." *MacLean's* October 24, 1959.

disappeared in social policies and practice.¹⁶⁶

What did change is that psychoanalytic social work literature appeared with greater frequency in the 1940s, making adoption and the severance of biological ties more palatable. Unwed motherhood was redefined as evidence of deeper trouble and “unconscious hostility.”¹⁶⁷ “Psy” discourse permeated social work literature and unwed mothers were treated as “victims of their neuroses,” rather than circumstance.¹⁶⁸ Psychoanalytic discourse changed the focus from the mother’s “moral incapacity” toward a diagnosis of “immature personalit[y],” a charge also leveled at lesbians.¹⁶⁹ A mother’s rehabilitation now depended on skilled casework by professionally trained social workers, though treatment varied by class, race/ethnicity, age, and region.

Rather than having to “aton[e] for sinful behavior,” the relinquishment of her child through adoption was viewed as a symptom of psychological adjustment.¹⁷⁰ Psychoanalytic social work literature reinforced middle-class conceptions of childhood, by tightly coupling the mother’s *happiness* and the child’s *security*. Unwed mothers went from being a social problem to a “social *threat*,” as social

¹⁶⁶ Little, *No car, no radio*.

¹⁶⁷ In my previous oral history with a social worker at the Easton CAS in Ontario, (pseudonym), she attested that, between the 1940s and 50s, social workers used “pseudo-Freudian” explanations, writing thick descriptions of family dynamics for an unwed mother’s family of origin. Visual evidence of this change was provided when we compared the thickness of three random files from each of three decades, between 1930 and 1960, shown in the expansion from a few pages in the 1930s to a file that was many inches deep in 60s. Domineering mothers were frequently cited in unwed mothers’ files.

¹⁶⁸ Jane Lewis and John Welshman “Issue of Never-Married Motherhood,” 418.

¹⁶⁹ These quotes from the (1954) *British Journal of Psychiatric Social Work* are found in: Lewis and John Welshman “Issue of Never-Married Motherhood,” 410.

¹⁷⁰ (MTA) “Adjustment of Unmarried Mothers,” 1943; Lewis and Welshman “Issue of Never-Married Motherhood,” 418.

workers focused on the child's ability to form "effective family relationships."¹⁷¹

The very condition of illegitimacy, and the stigma associated with it, was causally linked to a child's *inability* to form relationships, which was perceived to be a factor in juvenile delinquency.¹⁷² Prevention work now referred to developmental supervision of children and regulation of the environments in which they would be raised.

Protection and assimilation strategies were most often used to remove children from families, who were less likely to "voluntarily" relinquish them, where mothers were blamed for the impoverished environments in which they lived.¹⁷³

Prevention rhetoric also justified other extreme legal and "extra-legal" strategies used to prevent the "feeble-minded" from reproducing, including incarceration, institutional supervision, sterilization, and deportation in the case of immigrants.¹⁷⁴

By the middle of the century, prevention discourse expanded to include *enhancement* strategies directed at unmarried mothers whose children were potentially adoptable. Adoption was presented as a positive nation-building strategy aimed at making "fit" families and strengthening the country after the losses of WWII.

¹⁷¹ "Adjustment of Unmarried Mothers," (TWC).

¹⁷² "Adjustment of Unmarried Mothers," (TWC) 1943:4; Mary Fairweather at Adoption Institute in Toronto, 1952 (MTA) CAS fonds 1001 Series 536; Lewis and Welshman "Issue of Never-Married Motherhood," 410.

¹⁷³ Marlie Kline, "Complicating the Ideology of Motherhood: Child Welfare Law and First Nation Women," *Queen's Law Journal* 18 (1993): 306-342.

¹⁷⁴ Jennifer Stephen, "The 'Incorrigible,' the 'Bad,' and the 'Immoral': Toronto 'Factory Girls' and the Work of the Toronto Psychiatric Clinic," in *Law, State and Society: Essays in Modern Legal Authority* ed. L. S. B. Knafla (Toronto, University of Toronto Press, 1995), 405-439.

Some historians believe that public agencies changed their approach because more white, middle-class girls [sic] were getting pregnant out-of-wedlock. There is some evidence that this was the case in Ontario, or at least the plight of middle-class mothers became more of an issue. In 1955, the Canada Welfare Council's "committee on services to unmarried parents" reported on a study they had conducted, finding the "unmarried mother may come from any cultural or economic background."¹⁷⁵ As they continued, "[W]hile some are below average intelligence, contrary to general belief many are girls of average or superior intelligence, still in school or working in occupations ranging from domestic service to professional work."¹⁷⁶

What social workers presented as new was the use of personality theory to explain cases of illegitimate pregnancy. They admitted that there were "multiple factors involved" in every case, but one factor recurred "constantly...notably, that most unmarried mothers appear to have experienced unsatisfying parental relationships." The circle was closed by making a link to the widely "accepted" theory that "a child's personality is molded in early years and that a person's ability to get along with others depends on the early relationships with parents."¹⁷⁷ When these basic relationships were unhappy children would grow up to have difficulties "relating to other persons;" moreover,

Illegitimate pregnancy is considered as a sign of a person's inability to adjust satisfactorily to the pressures and responsibilities of

¹⁷⁵ "The Unmarried Mother," Draft of Paper by the Committee on Services to Unmarried Parents," Canadian Welfare Council (December 1955): 1-2. (MTA) CAS fonds SC1 Box 115 File #18.

¹⁷⁶ "The Unmarried Mother," 1 (MTA) CAS fonds SC1 Box 115 File #18.

¹⁷⁷ Ibid., 1-2.

adulthood. It is a symptom of a basic problem in adjustment just as stealing, setting fires and poor adjustment in school may be. Although this is a fairly new theory, there is now sufficient weight of evidence to substantiate the importance of this viewpoint.¹⁷⁸

Older narratives about the threat of “race suicide” informed those who worried about middle-class women terminating their pregnancies or giving up infants to unregulated providers. U.S. historians, Solinger and Kunzel, describe the contradictory racial constructions of unwed pregnancy as “shame versus blame,” or “White neurosis [and] Black Pathology.”¹⁷⁹ The punitive treatment of immigrant “factory girls” who became pregnant, and discriminatory treatment of First Nations’ women, suggests that similar race and class ideologies operated in Ontario, producing two faces of adoption.¹⁸⁰ Solinger believed there was a class disadvantage operating, separating out those who could afford to make their own private arrangements.

Sociologists offered their own racial constructions describing illegitimacy as a problem of “cultural relativism,” and classifying the “less developed” family patterns of non-Western Europeans as “sub” or “counter-cultural.”¹⁸¹ Jose criticized experts who described West Indians as “morally looser” rather than examining the strength of the mother-child relationship.¹⁸² Families who supported their unwed

¹⁷⁸ Ibid., 2-3.

¹⁷⁹ Ricki Solinger, *Wake Up Little Suzie* (New York: Routledge, 1992), 231. See also Regina Kunzel, “White Neurosis, Black Pathology: Constructing Out-of-wedlock Pregnancy in the Wartime and Postwar United States”, in J. Meyerowitz, ed., *Not June Cleaver: Women and Gender in Postwar American, 1945-1960* (Philadelphia: Temple University Press, 1994), 304-331.

¹⁸⁰ Kline, “Complicating the Ideology,” 306-342; Stephen, “The ‘Incorrigible,’ the ‘Bad,’ and the ‘Immoral,’” 405-439.

¹⁸¹ Robert W. Roberts, “A Theoretical Overview of the Unwed Mother,” in *The Unwed Mother*, ed., by Robert W. Robert (Harper and Row: New York, 1966).

¹⁸² Jose, “American Caricature of the Unmarried Mother,” 246.

pregnant daughters were, paradoxically, defined as culturally backward and developmentally lower because they treated the social problem as morally neutral and failed to internalize dominant cultural norms.

Evidence of the psychoanalytic shift in adoption and social work discourse was already present in the Toronto Welfare Council's (1943) study of children who remained with their unmarried mothers. Social workers assumed children faced problems because of the stigma of illegitimacy, but now they put greater emphasis on the "unhappiness" and "resentment" of the mother and her extended family. They argued that family members took in unwed mothers under pressure, creating a situation that fostered irritability, resentment, and judgment, serving as a constant reminder of the mother's negative past. Social workers believed that the negative psychological and emotional states of mothers and family members created a "sub-normal" environment for the child to grow up in, leading to developmental, behavioral, and social problems (e.g. juvenile delinquency) later.¹⁸³

Some social work leaders believed a child's security (ability to form relationships) was negatively affected by remaining with their mothers; "[C]hildren require more than a place to live. They need a feeling of being wanted and loved within their family group if they are to develop normally."¹⁸⁴ Members of the TWC argued that the intervention of expert guidance could have helped to "release" the mother from her guilt feelings so she could release her child for adoption, providing

¹⁸³ "Adjustment of Unmarried Mothers," 4 (TWC).

¹⁸⁴ *Ibid*, 5.

“normal development” for the child and “normal satisfaction” for the mother.¹⁸⁵ They engaged in a process of *naturalization*, as new relations to nature (e.g. the child’s unfolding nature) were imagined through adoption.

Social workers at the TWC argued that unmarried mothers should not be *required* to care for children, and they recognized the inadequacy of current social arrangements; “[T]he mother who decides to retain custody of her child has a hard row to hoe.”¹⁸⁶ Compared to the morally punitive treatment of the past, there appeared to be the promise of more progressive attitude towards unwed mothers, and women in general.¹⁸⁷ Social workers claimed that womanhood was not to be equated with mandatory motherhood, and unwanted pregnancy was no longer an intractable problem.

Moreover, adoption scholar Frances Latchford has observed a tendency amongst contemporary commentators and advocacy groups to treat *all* unwed mothers who relinquished their infants as “victims.” The decision to give up a child is always taken as evidence that the mother’s agency was thwarted, because a good mother would have kept her child.¹⁸⁸ Within the adoption community, recent identity politics have created divisions between birth mothers who relinquished children before and after Roe versus Wade (and Morgentaler in Canada), revealing a limited understanding of choice. The question of women’s agency must be placed within the

¹⁸⁵ Ibid.

¹⁸⁶ Ibid.

¹⁸⁷ Little, *No car, no radio*.

¹⁸⁸ Frances J. Latchford, “Reckless Abandon: The Politics of Victimization and Agency in Birthmother Narratives,” in *Adoption and Mothering*, ed. Frances J. Latchford (Bradford ON: Demeter Press, 2012), 75-77.

unequal social arrangements and relations that constrain women's choices to begin with, such as who is supported in having children and who is not. The burden of caring for children remains women's, and current social arrangements (ie. end of the school day, hiring policies, lack of childcare) still tend to reinforce the normative assumption that all mothers are supposed to have a male breadwinner.

More recently, scholars have begun to question uncritical acceptance of the idea that "social attitudes" became more progressive after WWII.¹⁸⁹ As Thane has stated:

[A]t all times, sympathy and condemnation have co-existed and conflicted in shifting measure....In some sections of society, there was considerable tolerance of unmarried motherhood before World War Two, a continuation of a much older tradition, and in some respects some of these women and children's lives initially became more difficult in the post-war 'welfare state', though there were also gains.¹⁹⁰

In Canada, pregnancy outside of marriage was not always treated as a tragedy.

Extended family members, as "kith and kin," were involved in raising children in many different communities.¹⁹¹ Household arrangements in working, middle, and upper-class families historically included non-relatives as members, as apprentices and domestic workers. Strong-Boag suggests that for the working-class, "collaborative child-rearing" was a sensible response to urban, industrial conditions

¹⁸⁹ Pat Thane, "Unmarried Motherhood in Twentieth-Century England." *Women's History Review* 20, no. 1 (2011): 11-29; Jane Lewis and John Welshman "The Issue of Never-Married Motherhood in Britain, 1920-70," *Social History of Medicine* 10, no. 3 (1997): 401-18; Maria Luddy, "Unmarried Mothers in Ireland, 1880-1973." *Women's History Review* 20, no. 1 (2011): 109-26; Chunn and Gavigan, "From Mother's Allowance to Mothers Need Not Apply," 741.

¹⁹⁰ Thane, "Unmarried Motherhood," 12.

¹⁹¹ Veronica Strong-Boag, *Finding Families, Finding Ourselves: English Canada Encounters Adoption from the Nineteenth Century to the 1990s* (New York: Oxford University Press, 2006); Veronica Strong-Boag *Fostering Nation: Canada Confronts Its History of Childhood Disadvantage* (Waterloo, ON: Wilfrid Laurier University, 2011).

and caring for family members.¹⁹² Moreover, the children of elites (e.g. Eleanor Roosevelt) were often sent abroad for education and/or raised by nannies.

The available records on unwed pregnancy, before and after WWII, suggest that “many unmarried mothers and children vanished from the official record through absorption into the mother’s own family.”¹⁹³ It is harder to reconstruct the private lives of middle-class women and families because they were “less exposed to intrusive social investigators,” and they were more able to arrange an adoption or pay physicians to perform an illegal abortion.¹⁹⁴ While “shot-gun” marriages and subtle pressure on families to support pregnant daughters were not unusual for the middle-class, more flexible family arrangements were customary within working-class families.¹⁹⁵ Women who could not afford to keep children placed them with foster parents, or in temporary boarding homes until they could return to reclaim them.¹⁹⁶

Though unwed motherhood would be reconstructed many times over the twentieth century, “practices on the ground” changed very little for over fifty years, as “provision for unmarried mothers remained in the hands of voluntary organizations.”¹⁹⁷ In 1930s Canada, as in the U.K., unmarried mothers seeking assistance were still mainly cared for by families or voluntary and religious organizations, even though the Protestant, Catholic and Jewish CAS in

¹⁹² Strong-Boag. *Fostering Nation*, 11-13

¹⁹³ Thane, Pat. "Unmarried Motherhood," 15; "Adjustment of Unmarried Mothers," (TWC)1943.

¹⁹⁴ Thane, "Unmarried Motherhood," 15; Strong-Boag, *Finding Families, Finding Ourselves*.

¹⁹⁵ Thane, "Unmarried Motherhood," 14-16; Strong-Boag, *Finding Families, Finding Ourselves*.

¹⁹⁶ Thane, "Unmarried Motherhood," 11-29.

¹⁹⁷ Lewis, and Welshman "Issue of Never-Married Motherhood," 404; Thane, "Unmarried Motherhood," 11-29; Little, *No car, no radio*.

Ontario had greater legal responsibility for children.¹⁹⁸

The Department of Public Welfare in Ontario became responsible for welfare legislation and the Charitable Institutions Act in 1930, although there continued to be a mixed model of private (charitable) and public funding, shared by the municipalities and province. The legislation covered maternity homes, fifty-eight CAS' and thirty-six children's institutions, all of which operated with uncertain funding and undeveloped administrative procedures.¹⁹⁹ Maternity homes were particularly vulnerable during the depression years because voluntary funding was inconsistent, and social services were stretched to the limit because of depression and war. The numbers of "illegitimate" births recorded in Ontario in 1939 was 2,884.²⁰⁰ Government-sponsored maternity homes pressured unwed mothers to board with them for at least six months and take their children with them when they left. Some commentators believe the main concern was the mounting cost of keeping children in institutions, not maternal bonding.²⁰¹

The infamous case of Mom Whyte and Whytehaven in Bowmanville, Ontario, exposed the government's laissez-faire attitude to fostering practices, and the demand for informal foster homes during the depression and postwar eras. To date, very little has been written about the home, yet "Mom" and her husband took

¹⁹⁸ Bonnie Hoppe, "Review of Maternity Homes," 1983; Lewis and Welshman, "Issue of Never-Married Motherhood," 401-18.

¹⁹⁹ Peter Turner, *Operational Review: Children and Youth Institutions*. Final Report, Ministry of Community and Social Services (Government of Ontario, 1979).

²⁰⁰ *Report of the Registrar General*, no. 13, (1946): 14.

²⁰¹ Turner, *Operational*, 13.

in over eighty children, who appeared on her doorstep for years.²⁰² When times were particularly difficult they became television personalities, bringing in donations from local farmers, businesses and corporate sponsors, suggesting how ordinary the operation of homes were. The home was eventually shut down after two children died, amidst revelations of overcrowding and inadequate regulation, and the government was compelled to respond.²⁰³ The case also served as a warning to social service providers and parents about the dangers of private services.

After WWII, social workers contributed to the moral panic about a supposed increase in illegitimacy, even though the numbers did not support it.²⁰⁴ The Registrar General's Report for 1946 indicated that, although the illegitimacy rate almost doubled between 1922-1946, the biggest jump occurred between 1921-1931. During that time the rate "rose 88 per cent as compared with a rise of only 7 per cent since."²⁰⁵ Historians chalk up the depression era increase to hard times, which led to the "postponement of marriage" and a breakdown of the "traditional" custom of marrying when a baby was on the way.²⁰⁶ Progressive maternalists pushed for increased public funding, because more children were coming into care due to

²⁰² Veronica Strong-Boag, "'Children of Adversity': Disabilities and Child Welfare in Canada from the Nineteenth to the Twenty-First Century," *Journal of Family History* 32, no. 4 (2007): 421; John McCullagh, *A Legacy of Caring: A History of the Children's Aid Society of Toronto* (Toronto & Oxford, Dundurn Press, 2002); Patti Phillips, *Blood Not Thicker Than Water: Adoption and Nation-Building in the Post-war Baby Boom* (masters thesis: Queen's University, 1995).

²⁰³ Sydney Katz, "Should They Let Mom Whyte Keep Her Children?" *MacLean's* (February 2, 1957): 9-11, 39-44; Katz, Sydney "What Can We Learn From Mom Whyte?" *Canadian Welfare* 33, no.7 (15 March 1958): 329-337; "Boy Strangles in Vent at Mom Whyte's Farm." *Toronto Star* 24 (July, 1957).

²⁰⁴ Little, *No car, no radio*.

²⁰⁵ *Report of the Registrar General* 13 (1946):14.

²⁰⁶ Veronica Strong-Boag, Introduction to Andree Levesque: "Deviants Anonymous: Single Mothers at the Hôpital de la Misericorde in Montreal, 1929-1939," in *Rethinking Canada* (Toronto, Copp-Clark Pitman, 1991), 323.

higher paternal desertion; nevertheless, there was still a three-year waiting period for deserted (married) mothers seeking assistance, and unwed mothers were still excluded.²⁰⁷

In 1946, the *Halifax Herald* reported on the highlights of a conference paper delivered by Maud Morlock, to the Canadian Conference on Social Work in Halifax, regarding the "problem of illegitimacy."²⁰⁸ Morlock, a consultant and "distinguished social worker" with the U.S. Children's Bureau in Washington, D.C., spoke to public social workers of their shared concern with stemming the tide of privately arranged adoptions from "for-profit baby mills and shopping centres."²⁰⁹ The executive director of the Toronto Infants' and Children's Home and other Canadian experts in the field of adoption attended the meeting, and notes were made widely available to Ontario social workers within the CAS.

Morlock argued there was a need to change the *culture of social work*. She advised professional social workers to develop "a proper spirit of understanding" so they could distinguish their own profession from the punitive practices associated with private maternity homes.²¹⁰ The director of the Toronto agency agreed, saying the [unwed] mother was still held solely responsibly for her pregnancy and "branded with the scarlet letter."²¹¹ Morlock recommended that public social workers implement better *methods* and work more closely with "vital statistics officials in

²⁰⁷ Little, *No car, no radio*.

²⁰⁸ Maud Morlock, quoted in *Halifax Herald*, June 26, 1946 (AO) RG 29-1, Adoption Files "Canadian Conference on Social Work," 1945-46.

²⁰⁹ Morlock, *Halifax Herald* (AO) RG 29-1 Adoption Files 1945-46.

²¹⁰ Phyllis Burns, Secretary of the Canadian Conference Itinerary notes for the *Canadian Conference on Social Work*, (AO) RG 29-1-770 Files, 1945-46.

²¹¹ Ms. Carver, (AO) RG 29-1-770, Canadian Conference on Social Work, *Halifax Herald*, 1946

formulating legal procedures that protect the individual born out of wedlock."²¹² She made other practical suggestions, such as the introduction of index cards that would be available for everyone to use particularly in cases "where parental relationship [was] not important."²¹³

Two themes remained constant in the discourse of unwed motherhood: their *immorality* and *drain on resources*.²¹⁴ These ideas were reflected in and shaped the competing gendered ideologies and values of the liberal welfare state: the difference between charity and social justice. In 1975, for example, the Minister of Community and Social Services, Rene Brunelle, received a handwritten letter, from a woman who tutored pregnant unmarried "girls," expressing vague concerns about the potential for welfare fraud. She told the story of two different neighbours with adopted children, who had shown great "improvement" since being adopted into these families. She asked the Minister why the government did not offer unmarried "girls" money to give their children up for adoption?²¹⁵ Between 1940 and 1970 it became more acceptable and rational to the public, government officials, and professionals, to recommend the formation of families through adoption, as solutions to

²¹² Morlock *Halifax Herald* (AO) RG 29-1 Adoption Files 1945-46; P. Burns. Secretary of the Canadian Conference Itinerary notes for the *Canadian Conference on Social Work*, (AO) RG 29-1 Adoption Files, 1945-46.

²¹³ Burns, Itinerary notes, *Canadian Conference on Social Work*, (AO) RG 29-1 Files, 1945-46.

²¹⁴ Maria Luddy, "Unmarried Mothers in Ireland," 111; Dorothy Chunn and Shelley A. M. Gavigan. "From Welfare Fraud to Welfare as Fraud: The Criminalization of Poverty," in *Criminalizing Women*, ed. E. C. G. Balfour (Halifax, Fernwood Publishing, 2006), 217-235.

²¹⁵ Child Welfare Branch Files, "General Correspondence," 1975 (AO) RG 29-107. It is not exactly clear, from the letter, what the nature of the improvement was. The records also make reference to the 'New Child Welfare Act 1965,' (AO) RG 29-01-404. With the new act, the 55 CAS' no longer had to go through the municipalities as the province took 100% responsibility for the 40% of children of unmarried mothers, and the other 60% deemed "neglected." See Adoption Section (pp.36-43) of the proposed child welfare act.

sexual immorality and public expense.

The Problem of Childlessness and the Discourse of Psychology

The circulation of psychological expertise not only changed the discourse of unwed motherhood, it provided new explanations of voluntary and involuntary childlessness. Normal female maturation for married women was equated with having children.²¹⁶ One of the paradoxes of modern adoption was that childlessness was marginalized while parenthood became a patriotic necessity or an “informal demand of citizenship.”²¹⁷ Adoption became the solution to the problem of involuntary childlessness, enabling couples to “demonstrate their wholeness as a family” by having children.²¹⁸ Medical treatments that focused on the causes of infertility contributed to the demand for adoptable children. A new interest group emerged--white, middle-class, childless couples--who began to overwhelm adoption agencies with requests.²¹⁹ Ironically, one consequence was that agencies in Ontario became more selective about “what constituted a good adoptive parent.”²²⁰

Social workers had already begun to challenge assumptions about compulsory motherhood, but now they began to portray adoptive mothers as *social* mothers who “chose” motherhood, and it was only a small step to consider adoptive

²¹⁶ Adams, *Trouble With Normal*.

²¹⁷ Elaine Tyler May “Nonmothers as Bad Mothers: Infertility and the ‘Maternal Instinct’” in “*Bad Mothers*”: *The Politics of Blame in Twentieth-Century America*, ed. M. Ladd-Taylor and L. Umansky, eds. (New York: New York University Press, 1998), 198-219.

²¹⁸ Ralph Garber, *Disclosure of Adoption Information*, (Toronto: Ministry of Community and Social Services, 1985).

²¹⁹ Carp, *Family Matters*, 29.

²²⁰ Guyatt, “Adoptions in Ontario,” 13; Phillips “Financially irresponsible,” 329-361.

motherhood as the ideal type of *scientific motherhood*.²²¹ It was not only social workers who drew on these images; the emphasis on scientific motherhood allowed some “childless” women to argue they were particularly suited to parenthood because they had made an educated choice to be mothers.²²² Nonetheless, they still had to prove their suitability to a variety of experts and meet the requirements of normative motherhood.

One of the first measures of a couples’ fitness to adopt was a doctor’s testimony proving their infertility.²²³ Even so, some psychiatrists interpreted infertility as a defense against motherhood, revealing the incidence of psychiatric disorders directed at women, and a culture of mother-blaming that held women responsible for their own infertility.²²⁴ Elaine Tyler May describes how medical experts in the field of infertility looked to psychology to explain the half of all cases that eluded physiological explanation. When traditional treatments proved ineffective, more conservative experts used psychological and psychoanalytic theories to claim women were unconsciously “thwarting” motherhood, even if they appeared eager on the surface.

May describes one extreme account from the *Journal of the American Medical Association*, where three male experts—a sociologist, psychologist, and

²²¹ Evelyn Glenn, “Social Construction of Mothering: A Thematic Overview,” in *Mothering: Ideology, Experience and Agency*, ed., Evelyn N. Glenn, Grace Change and Linda Rennie Forsey (Routledge: New York, London, 1994), 1-29; Barbara Melosh, *Strangers and Kin: The American Way of Adoption* (Cambridge, MA, Harvard University Press, 2002); Balcom, “Constructing Families,” 219-232.

²²² Glenn, “Social Construction of Mothering,” 1-29.

²²³ Robert Walker, “Is Our System of Child Adoption Good Enough?” *Maclean’s* (September 1959): 73.

²²⁴ May, “Nonmothers as Bad Mothers,” 200-203.

gynecologist--expound on voluntarily childless women and women who rejected femininity, stating “[W]omen totally lacking the desire for children are so rare that they may be considered as deviants from the normal.”²²⁵ Similar interpretations appeared in popular Canadian magazines. The medical profession divided childless couples into three general categories, ranging from voluntary to involuntary, and not without moral valuations. The voluntary childless wanted to be free to pursue a career, travel, or a “glittering social life.”²²⁶ They stood in contrast to those who had a physiological problem that could be corrected with surgery or alternate insemination, or couples that had no physical “defect” but could not conceive.²²⁷

The journalist Dorothy Sangster interviewed one doctor who said, after meeting a woman in his office, he determined she was suffering from the ills of “modern materialism,” and advised her to stop shopping, “go to church more often, and spend more time with her sick mother.”²²⁸ Women were often blamed for causing their own infertility if they worked outside the home, or engaged in “unfeminine” activities, revealing the sexual double-standard and the class bias of experts. The stress of work on men was unthinkable after the war.²²⁹

The “romance with psychology” and Freudian theories appeared with greater frequency in popular and professional discourse, and psychological explanations of

²²⁵ May, “Nonmothers as Bad Mothers,” 203.

²²⁶ Dorothy Sangster, “The Brightening Outlook for Childless Couples,” *Maclean's* 73, no.22 (October 22, 1960): 28.

²²⁷ Sangster, “The Brightening Outlook,” 28.

²²⁸ *Ibid.*

²²⁹ Veronica Strong Boag, “Home Dreams: Canadian Women and the Suburban Experiment,” *Canadian Historical Review* 72, no. 4 (1991): 471-504; Pierson *They're Still Women Afterall*.

female infertility presented a paradox for those who regulated adoption practices.²³⁰ In the journal *Pediatrics*, one doctor wondered whether an infertile woman, whose psychological condition was diagnosed as a defense against motherhood, could really be a good enough adoptive parent?²³¹ On the other hand, physicians realized that potential adoptive couples could always seek out private adoption channels if they were rejected. Moreover, doctors had little control over “natural” families who did not seek professional judgment.²³²

Within social work the needs of the expanding society had become synonymous with the child, reflected in formal adoption policies guided by the “best interests of the child” doctrine.²³³ As agencies “exacted higher standards” they began to only accept parents “who could meet the higher standards” and exclude applicants who did not meet the normative ideals of parenthood.²³⁴ Social workers felt justified in being selective because of the shift in supply and demand. Not surprisingly, this led to conflict, as many of the couples excluded felt they more than met these higher, normative standards.²³⁵

By the end of the 1940s the focus of adoption practice, at least officially, changed from finding children for homes (e.g., well-to-do adoptive parents) to finding homes for children. However, one of the tensions that continued to run through adoption practice and social work was ambiguity about the client-social

²³⁰ Ellen Herman, *The Romance of American Psychology: Political Culture in the Age of Experts*, (Berkeley: University of California Press, 1995), 1-16. See also Gleason, *Normalizing the Ideal*.

²³¹ Julius B. Richmond, M.D. “Some Psychological Considerations in Adoption Practice,” *Pediatrics: Official Publication of the American Academy of Pediatrics* 20 (1957).

²³² Richmond, “Some Psychological Considerations in Adoption.”

²³³ Garber, *Disclosure of Adoption Information* 12; Carp, *Family Matters*.

²³⁴ Nichols in Guyatt, “Adoptions in Ontario”; See also: Phillips “Financially irresponsible.”

²³⁵ Sidney Katz, “Why Can’t You Adopt a Child”? *Chatelaine* 26 (September 1957): 13, 115-119.

worker relationship: whose interests were social workers protecting? Because professionals depended on the lay public for their moral authority, the establishment of trust was necessary; but trust could be compromised by any perceived conflict of interest, leaving social workers and the profession vulnerable.²³⁶

Therapeutism and The Strategy of Prevention Work

One of the fundamental principles of social casework was that each client coming into an agency should be treated as an “individual” who had an “individual problem and needs.”²³⁷ In reality, the boundary between parents and children’s needs was blurred in adoption. The discussion of adoption as a specialized field of practice typically involved dealings with three groups: the unmarried mother, the child and the adopting parents.²³⁸ Social workers invoked the “best interests of the child” doctrine, but *good* casework also involved making sure the “natural” parents were helped to reach the decision to relinquish a child *on their own*, “not impulsively or under undue stress.”²³⁹

Psychology provided interpretations of unwed motherhood that helped to justify severing parental ties, but social workers believed that unwed mothers needed expert guidance to come to the decision. One well-known adoption educator, from the Gesell Institute, addressed a group of adoption workers in Ontario, stating that “parents are so ill or handicapped, physically, emotionally or mentally that they are

²³⁶ Howard Becker, “The Nature of a Profession,” *Sociological Work: Method and Substance*. New Brunswick, N.J.:Aldine Publishing, 1977 [1970], 87-103; Abbott, *The System of Professions*.

²³⁷ Fairweather, Adoption Institute, 5-6. (MTA) CAS fonds.

²³⁸ Mary Speers, “Case Work and Adoption,” *The Social Worker* 16, no.3 (Feb.1948).

²³⁹ Fairweather, “Adoption Institute,” 8-9 (MTA) CAS fonds 1001.

incapable or incompetent to make responsible decisions on behalf of their children.”²⁴⁰

Prevention work in adoption increasingly came to mean helping “natural” parents come to the best decision, and implicitly, releasing them from legal parental attachments to ensure the “safety of the future adoption.”²⁴¹ On the one hand, welfare agencies adopted a formal definition of adoption that stated: “[A]doption is a legal process which terminates the parental rights of natural parents and establishes a person as the child and heir of adopted parents.”²⁴² However, social workers argued that formal regulations were not enough because if the emotional and psychological needs of parents were not taken care of “natural” parents might seek out their child, a fact supported by high profile cases.²⁴³

In response to one case, Phyllis Burns, secretary of the child welfare division of the CWC wrote, people want to be “protected against the whims of a mother who gives up her child and then changes her mind,” and “the best guarantee against a bombshell... is to adopt a child from a social agency.”²⁴⁴ As U.S. adoption expert Mary Fairweather told social workers, at an adoption institute in Toronto, “[L]aws cannot control emotions. Sound casework with the natural parents is one of the

²⁴⁰ Ibid.,9.

²⁴¹ *Report to the Minister of the Committee on Child Care and Adoption Services* Chapter III, ‘Protection Services’ 1951 (AO) RG 29 Files.

²⁴² Guyatt, “Adoptions in Ontario,” 12. Guyatt stated that Ontario social workers advanced this definition, as proposed by the Pennsylvania Joint State Commission on ‘Child Placement and Adoption.’

²⁴³ “Adoption and the Courts,” editorial *Canadian Welfare* 25, no. 7 (January 15, 1950): 2-4.

²⁴⁴ Phyllis Burns, *Saturday Night* (December 4, 1950).

greatest protections that adoption can have.”²⁴⁵ Legal and therapeutic knowledge merged in the reform of adoption practice, turning therapy into social policy.

Provincial officials reproduced the same psychoanalytic interpretations of unwed motherhood, found in the social work literature, and focused on psyches rather than social arrangements. In the 1951 *Report to the Minister of the Committee on Child Care and Adoption Services*, specific attention was given to the fact that the majority of children placed for adoption came from unmarried parents:

[W]e might say that girls who find themselves faced with this problem tend to come from homes where the internal relations were not happy ones. In their work with unmarried mothers, Children’s Aid Societies are faced then, not only with immediate problems of parenthood, but also with the emotional difficulties of the mothers, which have given rise to, and resulted from their socially unacceptable behaviour. It has been generally agreed by the Societies that it is their role to act as a strengthening and supporting influence in a way which will help the girls to adopt more acceptable behaviour, to help them to plan for the welfare of their children and to help them generally to become rehabilitated in society. In aiding mothers who wish to make decisions with respect to their future, and that of their children, both emotional and social factors must be considered. (The decisions are difficult to make and perhaps more difficult to follow).²⁴⁶

The irony, according to Solinger, is that experts (like officials) defined the unmarried mother’s behavior as “purposive,” presumably because she engaged in sex, or did not consider contraception (which was illegal in Canada). Furthermore, she was judged harshly for her “law-abiding” behavior--not getting an illegal abortion.²⁴⁷

²⁴⁵ Fairweather, “Adoption Institute,” 9 (MTA) CAS funds.

²⁴⁶ *Report to the Minister of the Committee on Child Care and Adoption Services* Chapter III, ‘Protection Services’ (1951), 12.

²⁴⁷ Solinger, “Psychological Explanations for White Single Pregnancy,” 47.

According to Swain, the “spectre” of the “true mother” haunted adoptive mothers and influenced judges who presided over contested cases, where they often resorted to “blood and belonging” arguments to award custody.²⁴⁸ The very act of defining different types of mothers, in “the adoption transaction” and the “interrogation” of mothers’ capabilities, reminded everyone there was still a difference, despite social workers’ attempt to “replicate” natural motherhood.²⁴⁹ The push for greater secrecy provisions in law was designed to give authenticity to families made by adoption, rather than simply protect the privacy of unwed mothers.²⁵⁰

For many social workers and government officials the children’s legal ties to their families of origin remained an obstacle to adoption.²⁵¹ Social work leaders argued the new trend was for agencies to accept legal responsibility for the child right away, rather than waiting for placement, as a way to avoid future conflicts. One of the significant benefits for the profession was that social workers had direct access to the child and, in affect, became “surrogate” mothers with their stronger legal position. They now had final responsibility for wardship, determining whether a child could be placed in adoption and sharing “jurisdiction” over the developmental supervision of the child with physicians, psychiatrists and psychologists as consultants.

²⁴⁸ Shurlee Swain, “Adoption, Secrecy and the of the True Mother in Twentieth-Century Australia. *Australian Feminist Studies* 26, no.68 (2011): 193-205. In the 1990s, perceived “race” (e.g. the child’s morphological features) increasingly played a role, not simply the facts of nature.

²⁴⁹ Swain, “Adoption, Secrecy and the Spectre,” 193-205.

²⁵⁰ Herman, *Kinship by Design*; Swain, “Adoption, Secrecy and the Spectre,” 193-205.

²⁵¹ *Report to the Minister of the Committee on Child Care and Adoption Services* (1951). The same arguments recently put forward by medical experts and social workers in *CMAJ* 2009.

Social workers had engaged in what Abbott calls a strategy of “enclosure,” claiming jurisdiction over an area, or tasks, (adoption) that were previously done by many different groups, and providing services to invisible and/or dissatisfied clientele.²⁵² In order to understand the significance of this change, it is necessary to place it within the inter and intra-professional conflicts that are not usually part of conventional histories of adoption.

The problems of unwed motherhood and childlessness were reinterpreted many times over the course of the twentieth century, but after WWII psychoanalytic social work literature appeared with greater frequency. As Epstein argues, social work has been "perennially involved in defining and redefining itself" and justifying its work, including its particular niche, knowledge base, practices, objects of intervention, and identity.²⁵³ As part of their redefinition and struggle for credibility in the postwar period, social workers formed alliances with professions in the emerging fields of psychology, psychoanalysis and social science in order to strengthen their own knowledge base, their scientific credibility, and practices. In doing so, they provided a new space of circulation for expanding fields of knowledge.

But, as Epstein also notes, very little analysis has addressed the implications of mainly female social workers forming alliances with disciplines—such as psychology, psychiatry and psychoanalysis—that actively excluded women from

²⁵² Abbott, *System of Professions*, 90-96.

²⁵³ Epstein, “Therapeutic Idea.”

their professions.²⁵⁴ Even at the time, some social work leaders began to express concerns about the uneven exchange between fields, and what they criticized as the one-way practice of collaboration, accusing psychiatrists of being undemocratic, and trying to “take over” rather than accept their role as consultants to the CAS.²⁵⁵ In the next chapter, I examine the response by social workers and describe the strategies of boundary work they used to distinguish their own practices from other knowledge-based professions within the therapeutic welfare state.

²⁵⁴ Epstein, “Culture of Social Work,” 3-26.

²⁵⁵ Margaret Griffiths (Ottawa). “Introduction: Social Case Work Matures in a Confused World” *The Social Worker* 15, no.5 (1947); Celia S. Deschin, “Collaboration Between Psychiatry and Social Work: The Use of the Psychiatrist as a Consultant in Family Agencies,” *The Social Worker/Le Travailleur Social* 25, no.3 (April 1957): 7-20.

Chapter Four

The Nation's Gardeners: The Interpretation Work of Social Workers

“[W]hat are the roots he brings to the new soil; how strong, how tender, how injured?”

(1952) H. Carscallen, Metro Toronto CAS

During the mid to late 1940s, individual Children's Aid Societies in Ontario and the Association of Children's Aid Societies (OACAS) began to promote the primary importance of qualified social workers in adoption. In 1948, the Canadian Welfare Council (CWC) described the placement of children as “probably of greater interest to the general public of Canada today than any other phase of social work.”¹ Despite warnings about the need for adoption placements to be done by “recognized social agencies,” many placements were still being “handled by relatives, doctors, lawyers, and other often well-intentioned individuals without reference to social agencies.”² Social work leaders needed to demonstrate, to professionals, officials and the wider public, that they had a distinct body of theoretical and practical expertise. They referred to the development and dispersion of their expertise as *interpretation work*.

Interpretation work is an important area of social work and process that remains relatively unrecorded in social work history, particularly in Canada. I found multiple references and increased attention to this work in CAS literature of the

¹ “Adoption Practices,” *Concerning Children*, Canadian Welfare Council: Ottawa (II) 3, (1948) 1-3. A 1948 publication distributed to the OACAS by the child welfare division of the Canadian Welfare Council (CWC), Ontario (AO) OACAS fonds Series F819.

² W.R. Webster, M.D., “Child Adoption,” *Foundations First* 2, no. 2, (1948) Hamilton, Ontario; Simcoe County Children's Aid Society, July 1948 (AO) OACAS fonds Series F819.

postwar period.³ U.S. adoption historian Ellen Herman provides one of the only references to *interpretation work*, describing it as one of four processes that defined scientific adoption and an “important *keyword* in the rationalization of modern adoption.”⁴ She found that social workers used the term in two different but related ways: to refer to public relations and to a belief in psychological interpretation. According to Herman, its “ubiquity” in the professional social work literature reflected the greater self-awareness of social workers as they tried to balance “contradictory roles... as educators of an unenlightened public...[and] service-providers” who “depended on [that same] public [for] support.”⁵

Canadian historian Veronica Strong-Boag argues that social workers could not escape inherent contradictions where “money and care-giving” met because the encounter was traditionally structured by gender.⁶ The patriarchal state had always relied on working and middle-class women, as foster mothers and poorly funded social workers, to take on the burden of “care” work, particularly for children living apart from their “first” families.⁷ Care work, for people who were marginalized and forgotten, remained undervalued and unsupported. Child welfare work was not

³ For example, I found multiple examples and requests for interesting stories for “public interpretation” work in the CAS staff bulletin and staff circular between, but not limited to, 1950-1965 (MTA) CAS fonds SC Box 90, Files 1-16.

⁴ In the early phase of this dissertation research, the only reference I could find to interpretation was a footnote by Ellen Herman, “The Paradoxical Rationalization of Modern Adoption,” *Journal of Social History* 36, no. 2 (2002): 381. Herman has since devoted a chapter to the process in Ellen Herman, *Kinship by Design: A History of Adoption in the Modern United States* (Chicago and London: University of Chicago Press, 2008).

⁵ Herman, “The Paradoxical Rationalization,” 339-385.

⁶ Strong-Boag, *Fostering Nation? Canada Confronts Its History of Childhood Disadvantage* (Waterloo: WLU Press, 2011), 4-8.

⁷ Strong-Boag provides a note about changes in terminology to refer to “natural,” biological, original, or “first” families. Recognizing the historical and political impact of the terms we choose, she prefers the chronological term first families. I try to retain the terms as they were originally used when it is relevant to the narrative. Strong-Boag, *Fostering Nation*, 4-8.

considered prestigious and the CAS had a hard time attracting highly qualified graduates because salaries were lower and caseloads higher.⁸ Despite the obstacles, between 1945-1960, social workers tried to raise the value of social work through adoption.

I found documentary evidence that social workers in Ontario consciously used the term “interpretation” in the two ways described by Herman, as they tried to balance contradictory roles educating the public and justifying public expense. But the term was also ambiguous. For example, some social workers began to conflate interpretation work with adoption casework itself going so far as to describe casework in adoption as the *defining method* of social work.⁹ In part, this was because adoption, like social work more generally, challenged the public and social workers to examine their own cultural values and biases. Social work leaders increasingly led campaigns to interpret their expertise in adoption to the public, the state, other professionals and members of their own profession.

The emphasis on interpretation in adoption illustrates the ongoing work that professions engage in because different segments of a profession have different definitions of “what the profession should be doing, how work should be organized and what tasks have precedence.”¹⁰ In other words, members within a profession “have different conceptions of what constitutes the core -- the most characteristic act

⁸ John McCullagh, *A Legacy of Caring: A History of the Children's Aid Society of Toronto* (Toronto & Oxford: Dundurn Press, 2002), 113.

⁹ Alice L. Taylor, “Current Trends in Case Work Practice,” *The Social Worker* 13, no. 3 (April 1945): 1-11.

¹⁰ Strauss and Bucher, “Professions in Process,” 12-13.

-- of their professional lives.”¹¹ Adoption was also a productive site of change within the profession that is frequently overlooked in general histories of social work.

One of the continuities of adoption and values that was challenged was the “blood bias.” Herman argues that enduring beliefs about blood were the reason why there were efforts in the postwar period to “subject adoption to regulation, interpretation, standardization, and naturalization,” the four key processes that made up scientific adoption.¹² Adoption was still considered “flimsy,” “inauthentic,” and “deficient” by members of the public and many practitioners, who feared that families without a blood connection would not “thrive.”¹³ Despite the efforts of reformers, who tried to establish the authenticity of other family formations, blood still remained[s] the “measure of realness” reducing the complexity of identity to nature as blood, (and now genes).¹⁴

The title of the chapter, the “nation’s gardeners,” is meant to bring attention to a third form of interpretation work in adoption, what I refer to as the “practical work of heredity,” which is usually confined to the history of genetic counselling and medical historians.¹⁵ In this and the following chapter I show how social

¹¹ Strauss and Bucher, “Professions in Process,” 13.

¹² Ellen Herman, *Kinship by Design: A History of Adoption in the Modern United States* (Chicago and London, University of Chicago Press: 2008), 7.

¹³ *Ibid.*, 7.

¹⁴ Herman, *Kinship by Design*, 7-9; Marc Berg, and AnneMarie Mol, “Differences in Medicine: An Introduction,” in *Differences in Medicine: Unraveling Practices, Techniques, and Bodies* (Durham and London: Duke University Press, 1998), 7. Mol and Berg argue there are many possible reductions of human persons, rather than one, so we must consider the advantages and disadvantages of different reductions in context.

¹⁵ I discuss the “practical work of heredity” in more detail in Chapter five. I am indebted to Fiona Miller for this phrase, described in her history of medical genetics in Canada. Fiona Miller, *A Blueprint for Defining Health: Making Medical Genetics in Canada, 1935-1975* (PhD diss, York University 2000). See also Molly Ladd Taylor, “A Kind of Genetic Social Work: Sheldon Reed and the Origins of Genetic Counselling,” in *Women, Health and Nation*, ed., Georgina Feldberg, Molly-

workers acted as mediators of health for the emerging therapeutic state, through their practical work in adoption. Social workers began to emphasize their skills at interpreting the interactions between nature (heredity) and nurture (social environment), translating natural and social science. Practitioners engaged in multiple forms of interpretation work in adoption, interpreting the risks associated with private adoption and providing new psychological and psychoanalytic interpretations of unwed pregnancy, children's health, and broader social health.¹⁶In the process, they helped to privilege psychological explanations over social explanations for social problems.

In order to analyze the place and significance of interpretation work in adoption, I draw on Thomas Gieryn's concept of *boundary work* as "demarcation practices," which Abbott, likewise, applies to the system of professions. Abbott interrogates the strategies that occupational groups, particularly "emerging" professions, use to claim jurisdiction over professional tasks. From his perspective, professionalization is akin to a turf-war in which struggling professions find a vacancy, or fight for one, within an interdependent system of professions, by claiming jurisdiction over specific tasks. Within the system of professions a move by one affects all the others, just as a disturbance in one propagates through others.

Abbott argues that: "[J]urisdiction embodies both social and cultural control," where cultural control arises from work tasks legitimated by formal knowledge "rooted in fundamental values," and social control "arises in active

Ladd Taylor, Alison Li and Kathryn McPherson (Montreal & Kingston, London, Ithica: McGill-Queen's Press, 2003), 67-83.

¹⁶ Herman, *Kinship by Design*, 3.

claims put forth in the public, legal and workplace arenas.”¹⁷ There is a tension, however, because of the contradiction between the formal (public and legal) arenas and the informal (workplace) arena. The workplace may be organized with clear jurisdictions in mind but organizational reality undermines this because public institutions face chronic underfunding, staff shortages and institutional demands.¹⁸ Professions must reconcile these contradictions because they affect their daily work experience.

More dominant professions often draw on the “public picture” of what they do (eg. doctors within the hospital) to emphasize formal differences in their tasks, mainly to subordinates, to maintain their authority. The various methods that professions use to distinguish their tasks are referred to as “*boundary-drawing*.” In contrast, subordinates (e.g. nurses to doctors, RNAs to RNs) tend to emphasize commonalities in what people do in day-to-day practice to get the job done, referred to as *workplace assimilation*, a strategy that can also become a threat.¹⁹ The insight of feminist scholars like Addams, that “professions are gendered institutions,” means we also need to consider to how social work professionalization strategies were shaped by gender and other social relations, as part of a gendered, professional credibility struggle.²⁰

¹⁷ Andrew Abbott, *The System of Professions: An Essay on the Division of Expert Labor* (Chicago and London: University of Chicago Press, 1988), 86.

¹⁸ Abbott, *The System of Professions*, 66.

¹⁹ Abbott, *The System of Professions*, 67.

²⁰ Tracey L. Adams, “Professionalization, gender and female-dominated professions: Dental hygiene in Ontario,” *The Canadian Review of Sociology* 40, no. 3 (2003): 268; Cynthia Comacchio,

Social workers faced a “perennial struggle” to justify their profession, which had always been unfavourably compared to scientific medicine.²¹ In the postwar period, social work gained its “social validation” by borrowing from “neo-Freudianism” and “ego psychology,” while tying itself professionally to the medical profession.²² The changing nature of social work invoked older tensions between the meaning of knowledge versus skill, and value-oriented practice versus the neutral, objective techniques associated with growing welfare bureaucracies.²³

In modern societies, science had emerged as a kind of shorthand as “*the* source of cognitive authority” and “interpreter of nature,” bringing with it “copious material resources and power” in university research dollars as well as regulatory presence in the courts through the increased use of expert opinions.²⁴ According to Gieryn, the need for boundary-work was more than an analytic problem; success brought material rewards and authority for those included inside the “sanctuary of science,” while excluding others. Boundary work was “part of ideological efforts by *scientists* to distinguish their work and its products from non-scientific intellectual activities.”²⁵ In this chapter, I show how social workers, traditionally considered

²¹ Laura Epstein refers to this struggle in: “The Culture of Social Work,” in *Reading Foucault for Social Work*, ed. Adrienne S. Chambon and Laura Epstein (New York: Columbia University Press, 1999), 12.

²² Nigel Parton, *Governing the Family: Child Care, Child Protection and the State* (New York, St. Martin's Press, 1991), 16.

²³ Ken Moffatt, *A Poetics of Social Work: Personal Agency and Social Transformation in Canada, 1920-1939* (Toronto: University of Toronto Press, 2001).

²⁴ Thomas F. Gieryn, “Boundary Work and the Demarcation of Science from Non-Science: Strains and Interests in Professional Ideologies of Scientists.” *American Sociological Review* 48 (December 1983): 784. For descriptions of the corresponding growth of new forms of scientific knowledge and use of expert opinion in child protection cases see: Ian Hacking, *The Social Construction of What?* (Cambridge, Mass. & London: Harvard University Press, 1999); Lorna Weir, *Pregnancy, Risk and Biopolitics: On the threshold of the living subject* (London & New York: Routledge, 2006).

²⁵ Gieryn, “Boundary Work and the Demarcation of Science,” 782.

non-scientists, engaged in boundary drawing to distinguish their own adoption practice from amateurs, as well as competing professions, through:

their attribution of selected characteristics to the institutions of science (i.e., to its practitioners, methods, stock of knowledge, values and work organization) for purposes of constructing a social boundary that distinguishes some intellectual activities as 'non-science'.²⁶

I also extend the framework to take account of divergent interests within the profession and consider the alliances that social workers forged with members of other professions.²⁷ The significance of the boundary work literature, Whelan contends, is to provide a “corrective” to understanding science as monolithic, self-sustaining and/or determining, where lay people are considered “bystanders” who simply consume or reject science based on mistrust or superstition.²⁸ Instead, alliances between scientists and the public, as between occupational groups/professions, can be considered “conditional and strategic” and different knowledges “emerge as relational and mutually determining.”²⁹

The emphasis that social workers placed on interpretation work in adoption was part of their ongoing struggle for self-definition. Philosopher of science Ian Hacking describes it as a process of “making up people” suggesting as researchers we follow “how social workers invent their field of knowledge as they

²⁶ Gieryn, “Boundary Work and the Demarcation of Science,” 782.

²⁷ Strauss and Bucher, “Professions in Process,” 17; Emma Whelan, “Well Now, Who's the Doctor Here?” *Boundary-Work and Transgression in Patient and Expert Knowledges of Endometriosis*. (PhD diss., Carleton University, 2000), 53-58.

²⁸ Whelan, “Boundary-work and Transgression,” 59.

²⁹ *Ibid.*

simultaneously invent themselves.”³⁰ Likewise, social work theorist Adrienne Chambon explains, “[L]inking subjectivity to actions and knowledge [helps us to] better understand how *doing constitutes the doer*, how social work *activities create clients and workers*.”³¹ Boundary-work as a process of professional demarcation was coterminous with “making up” social workers in relation to clients (adoptable children, unfit mothers, and adoptive parents) and other knowledge-based professions.

Interpretation and Boundary Work in The Workplace Arena

Lily Kay describes the immediate postwar period as characterized by a greater “interdisciplinary” ethos, reflected in the collaborative efforts between business, science and religion, and supported by the Rockefeller Foundation and Carnegie Institutes, in the United State and Canada.³² The stated goal was to help individuals adjust to the changing environment, a territory historically claimed by social workers. The period was marked by a proliferation expertise from knowledge-based experts. Social workers increasingly defined themselves as experts of the social environment and tried to create a scientific niche in adoption:

Social casework, historically developed for and charged with responsibility for helping individuals make their *optimum adjustment*

³⁰ Ian Hacking, *The Taming of Chance* (Cambridge & New York: Cambridge University Press, 1990), 3; Leslie Margolin, *Under the Cover of Kindness: The Invention of Social Work* (Charlottesville and London: University Press of Virginia, 1997) 8; Adrienne S. Chambon, “Foucault’s Approach: Making the Familiar Visible,” in *Reading Foucault for Social Work*, eds Alan Irving, Adrienne S. Chambon, & Laura Epstein (New York, Columbia University Press, 1999), 78.

³¹ Ian Hacking, “Making Up People,” In *Historical Ontology* (Cambridge & London: Cambridge University Press, 2004) 99-114; Chambon. “Foucault’s Approach,” 78. [emphasis added]

³² Lily Kay, *The Molecular Vision of Life: Caltech, the Rockefeller Foundation and the Rise of the New Biology* (New York: Oxford University Press.1993), 200.

to their environment, has logically considered adoption work as a part of its province. The community has a right to look to its social agencies for leadership in setting standards and in providing and developing professional skills for sound adoption programs.³³

Concerns about the need for “boundary-drawing” and the threat of workplace assimilation, had already been expressed within the social work literature. As early as 1941, the Welfare Council of Toronto organized an Institute on casework with the goal of collaboration in mind. The organizing committee, made up of leaders from the Toronto community, identified needs that extended beyond their own organizations and boundaries.³⁴ The committee had two objectives: to bring case-workers together to share “experience and thinking” and to bring the “knowledge of experts in related fields . . . to the assistance of the workers.”³⁵ Workers from fifty-five agencies and organizations attended the Institute, including ten from outside the city, and proceedings were published and sent to all participating agencies, or by request.

Many leading experts from Toronto attended the Institute with most of the papers presented by junior caseworkers, said to reflect the “freshness and vigour” of those in face-to-face contact with problems.³⁶ The sessions were organized around three topics: 1) how to deal with the tension between authority “in the form of laws, agency regulations, institutional rules, etc.” and the “clash” with progressive case-work schools; 2) the relationship between case work and group work (or therapy)

³³ Mary Fairweather. “*New Trends in Adoption*,” (MTA) CAS fonds 1001 Series 537, Adoption Institute in Toronto, Welfare Council of Toronto (WCT), 1952:3. [emphasis added]

³⁴ “Casework Institute” *The Social Worker* 9, no. 5 (July 1941): 13-14.

³⁵ *Ibid.*, 13.

³⁶ *Ibid.*

with children; and, 3) the relationship between case work and psychiatry, including mental hygienists.³⁷ The list of topics suggests the existence of differences over what the core values and directions of the profession should be, (e.g progressive case-work versus individualized treatment) as they tried to gain a foothold in the bureaucratic system of professions.

Signs of inter-professional competition were reflected in the OACAS journal, the *Social Worker*, which reported that social workers and psychiatrists adopted a motion to work more closely together. The “Case Work Committee” of the TWC was formally directed to work together with psychiatrists and operationalize suggestions put forth by the parties. During discussion, male psychiatrists described their frustration with social workers and one psychiatrist stated that he expected more “help from the case worker than he sometimes gets, and on the other hand, that the case worker would like to be able to get more help from the psychiatrists in understanding the emotion [sic] problems of her clients.”³⁸

One of the earliest references to “interpretation” that I found was in *The Social Worker*, in 1947. It was used in an editorial and reprint of an article, based on a presentation given to a conference of social workers in New York City in 1946, by a doctor of philosophy.³⁹ Lindeman argued that the social work profession still had to interpret its practical and theoretical value to other professionals. The dominance

³⁷ Ibid., 13.

³⁸ “Casework Institute,” 13-14.

³⁹ Margaret Griffiths (Ottawa). “Introduction: Social Case Work Matures in a Confused World” *The Social Worker* 15, no.5 (1947); section called “Measures of Maturity,” by Dr. E. C. Lindeman, Prof. of Philosophy, New York School of Social Work, “Measures of Maturity,” speech given at conference of Social Work in New York in 1946. Section of his article reprinted in *The Compass*, Jan. 1947 and in *The Social Worker* 15, no.5, (1947).

of the developmental paradigm was reflected in his use of organic metaphors identified with functionalism. He described social work as a “developing” profession in its initial “stage” of growth, which had not yet “interpreted itself either to the academic administrators or to those specialists whose research and subject matter sustains the older professions.”⁴⁰ Lindeman emphasized a need for boundary-work when a profession was emerging; “[I]n the early stages of the evolution of a new profession the differentiating process must be accentuated.” But he also warned against the unfortunate side-effect of “habits of non-cooperation” that lead to “separation and divorce,” an allusion to the gendered, separate spheres argument furthered by structural functionalists, who argued that distinct and complimentary roles preserved “the marriage” and the social order.⁴¹

Maturity, he said, was achieved “when...practitioners are capable of merging their method with the methods of other professions dealing with the same or related situations.”⁴² Conflicts were, to some extent, portrayed as problems of coordination.⁴³ While a protective outer-skin was necessary “insulation” was to be avoided: “[S]ocial case workers, social group workers, community organizers, teachers, preachers, doctors, and the entire gamut of professional persons who presume to condition human behavior can maintain integrity of method only when they achieve a high degree of agreement respecting their common goal.”⁴⁴ Diversity

⁴⁰ Griffiths, “Introduction: Social Case Work Matures,” (1947): 23.

⁴¹ Talcott Parsons “The American Family: Its Relation to Personality and to Social Structure,” in *Family, Socialization and Interaction Process*, ed. Talcott Parsons and Robert F. Bales (New York: The Free Press), 3-33.

⁴² Dr. E. C. Lindeman, “Measures of Maturity,” (1947 [1946]): 22.

⁴³ Mol and Berg, “Differences in Medicine,” 8.

⁴⁴ Dr. E. C. Lindeman, “Measures of Maturity,” 23.

within a profession was seen as a problem. As with the medical profession, the model of professionalization social work was measured against, variations in practice were grounds for complaint.⁴⁵ Unity became “the norm against which variety must be measured and discarded” and diversity considered a temporary state, until standardization was achieved.⁴⁶

Underpinning Lindeman’s argument was a natural theory of society that emphasized social order and unity over conflict. The common goal for members of a “democratic” nation was “to translate democratic ideals into democratic practices.”⁴⁷ Drawing on the spiritual philosopher Ralph Waldo Emerson, he proposed that “the ends...pre-exist in the means,” and if we want to lead others to cooperate then professionals “must [first or also] learn to collaborate.”⁴⁸ The equation of professionalism with democratic ideals would be a reoccurring theme in postwar social work discourse, particularly in the rationalization of adoption.

When the leading American adoption expert and educator, Mary Fairweather, delivered her keynote address at an Adoption Institute sponsored by the Toronto CAS she too linked democratic progress with social work in adoption:

Our future moves forward on the feet of our children. Even if we would, we dare not fail to protect them. In this atomic age, the progress of the physical science has so far over-reached the progress of the sciences of human relations that civilization itself hangs in the balance. Our time is short and our need is desperate to develop human beings so well adjusted that they can live in peace with their neighbors, with their communities and with other nations. Where will these individuals develop? *In their homes*. Adoption workers

⁴⁵ Mol and Berg, “Differences in Medicine,” 7.

⁴⁶ *Ibid*, 7.

⁴⁷ Dr. E. C. Lindeman, “Measures of Maturity,” (1947 [1946]): 23.

⁴⁸ *Ibid*.

have a magnificent opportunity and an awesome responsibility to find the right homes for some of our future citizens.⁴⁹

Social work leaders had begun to recognize the professional and ontological significance of adoption, describing the “awesome finality” of the responsibilities placed on the profession. She reminded social workers that as professional service-providers, who were dependent on the public, they needed to “sharpen” their skills and methods to “safely hasten” procedures. Fairweather called upon social workers to educate and enlighten the public about the challenges they faced in adoption, by emphasizing the skills involved in order to counter (ongoing) allegations of “unnecessary delays and unreasonable ‘red-tape.’”⁵⁰ She recommended that social workers appeal to the reasonable-mindedness of people in the community, to remind them of the “sobering responsibility” of the act entrusted to social workers; after all, placement involved the *shaping of life itself*.⁵¹

Fairweather argued that modern social workers went beyond the surface to get at hidden factors in adoption. One of the ways that they did this, and one of the taken-for-granted grounds of communication, was the establishment of *trust*:

[T]o do this we must be able to form a close enough relationship with them ourselves to enable them to trust us enough to let us know them. . . . Parents who have accepted adoption as a desired goal and understand the importance of appropriate placement for their child's welfare, can more fully participate in achieving this in such ways as the giving of more detailed information about themselves and their

⁴⁹ Mary Fairweather at Adoption Institute in Toronto, 1952:12 [emphasis added] (MTA) CAS fonds 1001 Series 536.

⁵⁰ Fairweather, “New Trends in Adoption,” 1952; Frank Trumpane, “Too Much Red Tape?” *Globe and Mail*, August 1955 (AO) RG 29-1-772.

⁵¹ Fairweather, “New Trends in Adoption,” 1952.

families and in the taking of psychometric examinations. These too, may be considered new trends.⁵²

In that moment she bridged the perceived differences between two models of social work: Jane Addams “friendship” model and Mary Richmond’s objective, record-keeping practices.

One of the dominant narratives in Canadian and U.S. social work history is that the case work approach of Mary Richmond won out over the settlement-house model associated with Jane Addams and Hull House, and women’s radical community practice.⁵³ Addams was said to have rejected the casework approach of Richmond, claiming she did not want to keep files on her “neighbors,” trying to invoke a different ethical stance between those who resembled each other versus the “guardedness” between a charity visitor and welfare recipient.⁵⁴ The central difference was between activism and community based social work practice that tried to change institutional *structures* or improve social conditions, versus therapeutic social work that tried to change *individuals*.⁵⁵ Scholars have debated whether the shift to therapeutic practices represented a diversion from the core of social work, or whether social work practice was always compatible with the therapeutic state. Some are critical of accounts that emphasize social work’s loss of original values and authenticity, and instead interrogate the meaning and impact of

⁵² Mary Fairweather at Adoption Institute in Toronto, 1952 (MTA) CAS fonds 1001 Series 536

⁵³ Theresa Jennissen and Colleen Lundy, *One Hundred Years of Social Work: A History of the Profession in English Canada 1900-2000* (Waterloo, ON: Wilfrid Laurier Press, 2011).

⁵⁴ Margolin, *Under the Cover of Kindness*, 4

⁵⁵ Epstein, Jennison and Lundy, *One Hundred Years of Social Work*.

benevolence and “care-work.”⁵⁶ Others still, challenge the very notion of homogeneity, or shared interests, to understand and locate sites of change.⁵⁷

Boundary work: Defining the Core of Social Work

Trying to define the core values and activities of social work was difficult because the net of social work included a wide range of practices, locations, and professionals. Practices varied depending on the type of agency and funding available, for instance “public welfare, government initiatives, private charity, child protection, courts, corrections, hospitals, [and] schools.”⁵⁸ Abbott suggests that social workers worked “under” psychiatrists in child guidance clinics, in the 1930s, until they eventually mastered therapeutic language and broke the monopoly.⁵⁹ However, social workers were not a coherent group, and the “mastery” of therapeutic language was uneven at best.

A range of social work scholars have begun to reappraise the ethical relationships in social work practice. In Canada, Rossiter and Epstein have described them as “unequal encounter[s].”⁶⁰ Margolin argues that the effectiveness of social work comes from its claims to have no ideology, but instead a “mild-mannered eclecticism” making its power diffuse and invisible.⁶¹ Rossiter writes that

⁵⁶ Moffatt, Chambon, Epstein, Rossiter

⁵⁷ Strauss & Bucher, Rossiter

⁵⁸ Margolin. *Under the Cover of Kindness*, 2.

⁵⁹ Abbott, *The System of Professions*, 68.

⁶⁰ Amy Rossiter, "Unsettled Social Work: The Challenge of Levinas's Ethics." *British Journal of Social Work* 41 (2011): 980-95.

⁶¹ Margolin, *Under the Cover of Kindness*; See also: Chambon, “Foucault's Approach,”; Ken Moffatt, “Surveillance and Government of the Welfare Recipient.” *Reading Foucault for Social Work*, ed. A. I. Adrienne S. Chambon, & Laura Epstein, 219-245 (New York, Columbia University Press, 1999).

historically, social workers have treated clients as an extension of themselves and as objects of their own knowledge frameworks, rather than subjects who might challenge social workers' understandings of the world.⁶² They call attention to the implications of particular strategies of professionalization.

The "invention" of social work as a field of knowledge was part of broader social and cultural changes. As Ian Hacking showed, the twentieth century was marked by transformations that were connected to one another through "an avalanche of printed numbers...[T]he nation-states classified, counted and tabulated their subjects anew" with enthusiasm for numerical data, evident in census changes.⁶³ For him, the "printing of numbers was a surface effect...[B]ehind it lay new technologies for classifying and enumerating, and new bureaucracies with the authority and continuity to deploy the technology."⁶⁴ One of the effects of record-keeping was to stabilize "middle-class power by creating an observable, discussable, write-about-able poor," so that reform work was not simply about the alleviation of poverty; through social *work* the "trivial...ordinary...obscure...common life" were no longer silent or invisible, but had to be "said--written," and, therefore, known.⁶⁵

However, treating social work as a form of diffuse, middle-class power poses a dilemma, for those studying the profession and for practitioners. Analytically, it means:

⁶² Rossiter, "Unsettled Social Work," 980-95.

⁶³ Hacking, *The Taming of Chance*, 3.

⁶⁴ Hacking, *The Taming of Chance*, 2-3.

⁶⁵ Margolin, *Under the Cover of Kindness*, 5; See also: Ian Hacking, "Introduction," in *Representing and Intervening* (Cambridge, UK: Cambridge University Press, 1983).

the things social workers do cannot be restricted to any one profession or group of people. Physicians, psychologists, counselors of all kinds...can act as social workers because social work is a type of power, a way of seeing things, that traverses every kind of institution or profession, linking them, making them converge and function in a new way.⁶⁶

The paradox for postwar social workers was that they needed to establish their own expertise in order to collaborate within an interdependent system, but as sociologists have pointed out, social case-work techniques were (and could be) adopted by very different groups.⁶⁷ All of this heightened the need for boundary work.

Boundary Work as a Rhetorical Strategy

Gieryn defined boundary work as a rhetorical strategy used by emerging scientists, who drew on contradictory “images of science,” what he called conflicting *stylistic repertoires*, to construct different boundaries between themselves and other occupational groups. Rather than viewing them as “disingenuous,” or fictional ideological efforts, he says demarcation is simply a practical problem.⁶⁸ The kind of boundary work scientists, or other groups, engaged in varied depending on the goal: expansion, monopolization, or protection of autonomy.⁶⁹ When the goal was expansion, scientists used contrasts to raise their authority over competitors; if monopolization, they defined rivals as pseudo-scientists or amateurs.⁷⁰ Finally, in order to protect their autonomy, they blamed the negative consequences of science on “non-scientists” and others. Social workers

⁶⁶ Margolin. *Under the Cover of Kindness*, 2.

⁶⁷ Maurutto, Paula. *Governing Charities: Church and State in Toronto's Catholic Archdiocese, 1850-1950*. Ph.D. Thesis, Department of Sociology, York University, 1998; Miller, Peter and Nikolas Rose. *The Power of Psychiatry* (Cambridge: Polity, 1986).

⁶⁸ Gieryn, “Boundary Work,” 781-783.

⁶⁹ Whelan, “Boundary Work and Transgression,” 53.

⁷⁰ Gieryn, “Boundary Work,” 791-792; as cited in Whelan, “Boundary Work and Transgression,” 53.

practiced all three kinds of boundary work as they tried to improve their position and gain authority for adoption within existing institutional arrangements.

Systems theorists, similarly, claim that segments within a profession used different tactics relative to their position, whether they were trying to expand or were in a defensive position.⁷¹ Abbott agrees that any group that wants to enter the system of professions has to engage in boundary work to achieve and maintain public confidence, and establish jurisdictional authority.⁷² One of the places where we can investigate the practice of boundary work is the content of work, especially the kinds of *tasks* that people engage in, because, says Abbott, they are continually changing.

Three modes of professional work tied a profession to a specific task: *diagnosis, treatment, and inference*. Competitors challenged other professions by providing conflicting interpretations (or diagnosis) of social problems, promising different or better outcomes, and appealing to the degree of public satisfaction (or dissatisfaction).⁷³ In the 1940s and 50s, social workers provided new interpretations of childlessness, unwed motherhood, and adoption, by drawing on knowledge from psychology, psychiatry, psychoanalysis, and genetics, in order to offer their own interventions. One of the core tasks that social workers made jurisdictional claims over was *child placement* and they tried to distinguish their own scientific practices from two main “contrast cases:” religion and medicine. In so doing, they did not

⁷¹ Strauss and Bucher, “Professions in Process,” 20-21.

⁷² Abbott is described in more detail in Part II of this chapter. Abbott, Andrew. *The System of Professions: An Essay on the Division of Expert Labor*. Chicago and London: University of Chicago Press, 1988.

⁷³ Abbott, *The System of Professions*, 57-58. He provides a familiar example in the growth of “alternative” health care practitioners (e.g., chiropractors, osteopaths, massage therapists, etc.), who filled the gap left by public dissatisfaction with allopathic outcomes.

simply imitate the medical model of professionalization, they also tried to challenge it.

Conflicting Stylistic Repertoires: Craft Plus Science

Against the harshness of the machine metaphor with its efficiencies, and the ugliness of industrialization that gave rise to the child-saving movements, postwar social workers offered a vision of renewal in which they became the nation's gardeners.⁷⁴ Their style of discourse was not ill chosen and botanical metaphors were not new. Gardening metaphors had been employed by the early child-savers, such as J. J. Kelso, as part of humanist reform efforts.⁷⁵ The same discourse was captured in 1952, when a well-known adoption worker in Ontario described a "parentless" child: "[W]hat are the roots he brings to the new soil; how strong, how tender, how injured?"⁷⁶

Once again, uncertainty about heredity provided opportunities to rethink the boundaries of nature and nurture, kinship and society, and social and scientific values, as well as professional boundaries. Social workers drew on the organic imagery of "soil" and "seeds," portraying themselves as capable gardeners involved in the delicate "transplanting of roots," stressing that quality and timing were the key to successful adoption placements. They used tragic tales and apocryphal stories of

⁷⁴ Cynthia Comacchio, "Mechanomorphosis: Science, Management, and 'Human Machinery' in Industrial Canada, 1900-45," *Labour/Le Travail*, 41 (1998): 35-67.

⁷⁵ Xiaben Chen, "Cultivating Children as You Would Valuable Plants: The Gardening Governmentality of Child Saving, Toronto, Canada, 1880s-1920s," *Journal of Historical Sociology* 16, no. 4 (December 2003): 460-86.

⁷⁶ Helen Carscallen, Supervisor of Research & Publicity, CAS and Infant's Homes of Toronto, "Some Psychological and Social Aspects of Legal Adoption" (MTA) #146464, Box 76, 1952, Draft article of final version that appeared in the *International Child Welfare Journal*.

well-meaning doctors to promote their own practical wisdom and skills, to professionals and lay audiences, while drawing on contradictory images of science.

On one hand, they defined their own practices as *scientific*, meaning *modern, objective and systematic*, in order to distinguish them from the un-scientific, unregulated “grey market” practices of doctors and lawyers. Social workers argued that many of the risks and dangers inherent in adoption practices could be avoided if adoptive parents followed the tenets of scientific adoption. The grey market in private adoptions was seen as tainted because money was often exchanged for children, and there was little accountability when private placements failed. Public adoption workers claimed to have a higher vocational “calling” because they were committed to democratic social welfare rather than expediency or commercial gain.

On the other hand, social workers were undoubtedly aware of competing public images of science and technology after the Second World War. They tried to distance themselves and their practices from the excesses of technology (physics of the H-bomb) and revelations of excessive social engineering under fascism. They appeared to contradict the image of themselves as scientific, by portraying their work as *social, subjective, and democratic*. They distinguished their work in adoption by arguing it was not “simply” scientific, eschewing popular images that reduced science to technique or technological knowledge alone.

One social worker described the evolution in social work as moving from technique, to skill plus theory. Casework, she said, was more than the indiscriminate, mechanical application of techniques, it reflected a “*skill based on philosophy and*

principles which guide one soundly in more selective, sensitive and constructive ways of helping.”⁷⁷ From this standpoint, the skills required for adoption casework were more *subjective* and craft-like and had to be learned on the job--much like clinical expertise. Adoption workers portrayed themselves as brokers, who could bridge the divide between natural and social scientific knowledge contending: “Social work is science at work in the interest of human values.”⁷⁸ Social workers, effectively, disassociated themselves from the blatant social engineering associated with wartime and postwar Europe, while simultaneously justifying the intervention of the state in “private” or family affairs. They did this by invoking the “best interests of the child” discourse; “[I]t must never be forgotten that *the child* is the first consideration of the Children's Aid Society!”⁷⁹

Social workers claimed to do more than simply apply scientific techniques; they looked for “hidden factors” invisible to the untrained observer. One expert with strong ties to the Gesell Institute in child psychology told an audience of social workers that the new trend in home visits was to focus on *intangibles* rather than the “house-keeping details” of earlier decades.⁸⁰ By distancing themselves from their foremothers’, through the imagery of house-keeping, postwar social workers drew on gender ideologies to elevate social work by separating it from the superficial, moral reform work of the past, in an attempt to de-gender the profession.⁸¹

⁷⁷ Alice L. Taylor, “Current Trends in Case Work Practice” *The Social Worker* 13, no.3 (April 1945): 3.

⁷⁸ Margaret Griffiths, “Introduction: Social Case Work Matures in a Confused World,” *The Social Worker* 15, no. 5. (1947): 24.

⁷⁹ OACAS, *The Citizen of Tomorrow*, 28.

⁸⁰ Mary Fairweather, “New Trends in Casework,” 1952.

⁸¹ Adams, “Professionalization, gender and female-dominated professions,” 268.

As a professionalizing strategy they drew a boundary between themselves and the “unskilled,” amateur practices of earlier charity workers and social workers. At the same time, if we understand professions as continually undergoing change, then we need not see this as a complete disavowal. As Strauss and Bucher contend, each “generation” engages in boundary-work or “spelling out” what the profession is and where they are going; thus, boundaries are diffuse because generations overlap. If we are to understand the professionalizing strategies that social workers engaged in we need to consider how “new groupings emerge” and how “movement is forced upon them by changes in their conceptual and technical apparatus, in the institutional conditions of work, and in their relationship to other segments and occupations.”⁸²

Boundary Drawing: The Difference Between Social Work and Psychiatry

In the 1940s, social workers had tried to distinguish casework as more than a mechanical application of techniques or abstract theory; it reflected “*skill based on philosophy and principles* which guide [sic] one soundly in more selective, sensitive and constructive ways of helping.”⁸³ Case-work was more flexibly attuned than theoretical knowledge alone, because it was complimented by practical experience in the field.⁸⁴ Taylor described some of the external influences on casework and agency processes during the war years, which included theoretical and practical knowledge of psychiatry, but also pragmatic constraints such as government expenses that limited relief and public services.

⁸² Strauss and Bucher, “Professions in Process,” 20.

⁸³ Taylor “Current Trends in Case Work,” 3.

⁸⁴ *Ibid.*, 1-11.

By the end of the 1940s, there were explicit “interpretation” campaigns designed to educate the public and professionals about the difference between social work and psychiatry. Over the next two decades, social workers would try to negotiate a form of “shared” jurisdiction over the same clients in adoption, rather than seek the “full” jurisdiction assumed by doctors, or remain as subordinates to psychiatrists and physicians. Social work leaders within the CAS positioned “psy” professionals and medical professionals as valued “consultants” to social workers in placement decisions. Examples of their efforts appear in speeches and papers presented by CAS members to the Department of Psychological Medicine at the Hospital For Sick Children, in “Conference Proceedings from the Child Welfare League of America,” and at the National Conference of Social Workers.⁸⁵

At one weekend institute in 1949, social workers at the CAS of Toronto raised concerns about the blurring of professional boundaries and the diffusion, or loss of social work identity. An emergency meeting was held afterward at the agency, and as reported in the staff circular, social workers were divided:

clarification is needed concerning the role that social workers are expected to play in the Society. There appears to be confusion in many minds as to the agency's concept and the feeling that we may be confusing psychotherapy with casework, etc.⁸⁶

In 1950, the same issue was raised in a news story in the *Vancouver Herald* newspaper, which covered the proceedings of the Canadian Conference of Social

⁸⁵ Mary Speers, “The Relationship of the Psychiatrist to Adoption Procedure,” November 1950, Paper given to Department of Psychological Medicine, H.S.C.” [Hospital for Sick Children]; “Adoption Practices in the Children’s Aid and Infants’ Homes of Toronto. November 27th, 1951; Paper given to Dept. of Psychological Medicine, H.S.C. (MTA-CAS fonds 1001); “Conference on Adoption Procedures and Practices” Child Welfare League of America, May 10-12, 1951 (MTA) CAS fonds 1001 Series 536, “Adoption Files” 1949-1961.

⁸⁶ “Adoption,” 1949-1955 (MTA) CAS fonds 1001, Series 536.

Workers held in Vancouver that year. The paper reported on the director of one Ontario Children's Aid Society, who accused social workers of "sometimes [being] 'guilty of hero worship' of the psychiatrist" and saying that "psychiatry in social casework [was] 'overdone.'"⁸⁷ He argued that workers who encountered difficulties took the easier road when they referred people to psychiatrists as a "substitute" for their own "sound social diagnosis."⁸⁸ His attempt to counteract the image that other social workers had of the profession, revealed segmentation within the profession, and conflicts that sociologists argue were heightened when a particular segment of the profession appeared to stand in for the whole.⁸⁹

The director warned social workers about the danger of borrowing knowledge from other professions, by constructing an urban morality tale that drew on a *Gemeinschaft/Gesellschaft* vision of social solidarity, to distinguish social from medical and psychological explanations. Ironically, he used the allegory of the old country doctor, as the ideal type of professional, to distinguish medical diagnosis from "sound" social diagnosis, or the specialist versus the generalist. Social workers who relied on psychiatry were practicing the equivalent of a form of medicine, which only dealt with a *part* of the body rather than the *whole* body, (or holistic medicine). To illustrate the difference, he used the analogy of the rural medical practitioner who had to fall back on his [sic] own resources (e.g. autonomous and independent) versus the urban practitioner who was out of practice because of his reliance on the "city specialist." The former had a thorough knowledge and

⁸⁷ "Social Work Too Reliant on Psychiatry" *Vancouver Herald*, June 1950 (AO) RG 29 Files 1-772.

⁸⁸ *Ibid.*

⁸⁹ These tactics are described in: Strauss and Bucher, "Professions in Process," 23.

grounding rather than being dependent on "another doctor as soon as the symptoms move on to some other part of the body."⁹⁰ The creation of an alternative public image and a definition of good knowledge, distinct from psychiatry, were dimensions of boundary work:

The body of knowledge about human behavior in its social setting which is available to the social workers today has brought us to the point where we can and should stand on our own two feet and not rely on the psychiatrist for a clinical diagnosis of a problem which may have little if any, relationship to mental health itself.⁹¹

As more males entered the profession, often in leadership positions, boundary work coincided with attempts to de-gender (read de-feminize) the profession, by emphasizing social science and cutting ties with social work's social justice origins. As Baines and Moffatt have shown, a new reform elite emerged, made up of mostly male, middle-class social scientists with ties to leading universities, particularly the university of Chicago and Harvard. They emphasized a scientific approach to social problems based on "the ideals of efficiency and social stability," where professionalism and secularism was supposed to replace the emphasis on activism and moral reform.⁹² Professionalism was equated with "male-centred values" of order, efficiency, and a division of labor, which gave priority to expertise and monopolization, and only afterward considered the "social good."⁹³ Though, as some feminist sociologists have wryly noted, the Chicago School of Sociology engaged in their own boundary work to distinguish sociology

⁹⁰ "Social Work Too Reliant on Psychiatry" *Vancouver Herald*, June 1950 (AO) RG 29 Files 1-772.

⁹¹ *Ibid.*

⁹² Baines, "Professions and the Ethic of Care," 54; Moffatt, *A Poetics of Social Work*.

⁹³ Baines, "Professions and the Ethic of Care," 55.

from social work. Even as urban sociologists borrowed the participant observation methods of Addams' community research in the same city, they engaged in work to distinguish "theoretical" social science from the more "applied" (female-dominated) field of social work, to make a status claim.

The same underlying assumptions were reflected in a 1956 article, written by a graduate student, for *The Social Worker*. The writer drew on dominant images of science in an article entitled, "Social Work—Science or Magic," warning of a "theoretical deficit" in social work.⁹⁴ Kenyon argued that only the application of a "body of theory" distinguished "professional social workers" from "charitable enterprises."⁹⁵ He drew on familiar (negative) gender stereotypes with his assertion that social scientists dismissed social work theory as "mere illusion," holding an image of social work as "lofty sentiment in flat-heeled shoes."⁹⁶ But by focusing on the need for theory he skirted the main reason for the low social status of the profession. Social work in child welfare was undervalued because it was regarded as *women's work*; "[A]ssigned to clean up society's casualties, [social workers] risk[ed] becoming complicit or scapegoated."⁹⁷

Kenyon argued that the low self-esteem of the profession was due to this theoretical deficit and chronic understaffing, which had resulted in rationales that supported practices because "something worked." This was dangerous because the same logic could be used "by social workers of at least two different persuasions,"

⁹⁴ William A. Kenyon, "Social Work—Science or Magic?" *The Social Worker* 24, no.4 (1956): 17-20. Graduate Student, Department of Anthropology, University of Toronto.

⁹⁵ Kenyon, "Social Work—Science or Magic?" 18.

⁹⁶ Kenyon, "Social Work—Science or Magic?" 17-20.

⁹⁷ Strong-Boag, *Fostering Nation*, 4

one relying on the “method of science” and the other the “method of magic.”⁹⁸ Social workers gave the impression that they had simply grabbed a few psychological concepts and then placed more energy in developing “practical skills and knowledge.” Still, he suggested that social work had something unique to offer because social work was “applied social science” dealing with the increasing “social” nature of interpersonal relationships.

Social workers had their own contribution to make to science, based on the construction of the self in relation to others, but also in relation to other professions. He believed that making theory explicit would diminish the “PR” problem for social work and “enrich the social sciences” with data that demonstrated “the construction of the self” was a social product, rather than an embedded and reified entity. To some extent, his arguments demonstrated historical amnesia, by ignoring feminist theoretical work. He argued that the self that emerged within social relationships must be “formulated and presented—in scientific, not magical terms—by the social workers themselves,” reinforcing an image of social workers and a lay public, who rejected science because of superstition.⁹⁹ He concluded that social workers had to present their insights about human behaviour in a scientific manner, and not “accuse the scientists of ‘resistance’ when [they] reject[ed] the methodology of magic” otherwise, social workers would continue to be perceived as magicians.¹⁰⁰ It was a

⁹⁸ Kenyon, “Social Work—Science or Magic”? 18-19.

⁹⁹ Kenyon, “Social Work—Science or Magic”? 19-20; Whelan, “Boundary work and Transgression,” 59.

¹⁰⁰ Kenyon, “Social Work—Science or Magic” 20.

criticism that followed social workers, accused of being “fortune-tellers” when adoption “failed” and more children became wards of the state.¹⁰¹

In 1957, fifteen years after the Toronto Welfare Council organized the initial 1941 Institute on Casework, the issue of working together with psychiatrists was revisited in *The Social Worker*. The author, Celia Deschin, asked for three basic principles to be adopted in order to make collaboration truly “reciprocal” and “more democratic.”¹⁰² She argued that a measure of any profession’s maturity was “the degree of interest shown in the theoretical concepts underlying its techniques of practice.”¹⁰³ Her comments came in response to the 1956 decision made at the Family Agencies Institute of Ontario and Quebec where it was decided that the principles (or theories) underlying collaboration between social work and psychiatry had to be revisited; remarkable, she says, because the profession had been marked by an “imbalance[d]” focus on practice over the past three decades. The decision prompted a broader, historical analysis of the alliance that social work had formed with psychiatry, in the original collaboration between medicine and social work in the early part of the 20th century.

Deschin engaged in boundary drawing to distinguish the characteristics of science from non-scientific intellectual activity, placing social workers under the umbrella of science by focusing on the theoretical underpinnings in social work.¹⁰⁴

¹⁰¹ Harold Treen, “Study of Permanent Wards of 55 Children’s Aid Societies in the Province of Ontario,” Minister’s Committee on Child Welfare (1963):1-27 (AO) RG 29-01-501.

¹⁰² Celia S. Deschin, “Collaboration Between Psychiatry and Social Work: The Use of the Psychiatrist as a Consultant in Family Agencies,” *The Social Worker/Le Travailleur Social* 25, no. 3 (April 1957): 7-20.

¹⁰³ Deschin, “Collaboration Between Psychiatry and Social Work,” 7.

¹⁰⁴ Gieryn, “Boundary Work and the Demarcation of Science,” 783.

She emphasized three principles that social work needed to adopt “irrespective of differences in agencies, communities, or in the professional personnel involved.”¹⁰⁵

The first was that social workers needed to adopt a more critical attitude to both psychiatric and social work data, (though mainly the former) and Deschin recommends this be achieved through “the inculcation of a scientific attitude.”¹⁰⁶ Secondly, as part of adopting a scientific attitude social workers had to clearly define the “objectives of consultation,” and thirdly, they had to clarify the “areas of knowledge” that each profession would be recognized as having “responsibility and authority” for. She raised methodological issues about demarcation that depended on negotiation between professions, regarding the kind of data that each profession would rely on, or have territory over, because both professions relied on “data ... in varying stages of verification” and not usually [derived] from statistically representative samples.¹⁰⁷ She made boundary work explicit and showed it was necessary for collaboration because of the conflictual nature of the system of professions.

Interpretation Work in the Public Arena

In 1948, the Canadian Welfare Council defined the problem of “interpretation” as a public relations issue, drawing on market rhetoric to describe

¹⁰⁵ Deschin, “Collaboration Between Psychiatry and Social Work,” 7.

¹⁰⁶ Ibid.

¹⁰⁷ Ibid., 8.

the goal in adoption work as securing “satisfied customers.”¹⁰⁸ The implication was that agencies had been unclear with the community about what social workers did or what services they had to offer. The CWC recommended a “program of interpretation of social agency services to unmarried parents and adopting parents” in order to extend the number of services that agencies offered and to secure more funding for training, hiring and equipment. The best way to secure these things was to become known as a “reliable agency offering a high quality of service” because “[S]atisfied customers are the best advertisement for social agency services.”¹⁰⁹ Interpretation work with the public transgressed a basic distinction used to separate professionals from non-professionals: clients versus customers.

Sociologist Howard Becker argued that one of the most important aspects of acquiring the symbol and image of the “professional” was that it provided the “justification and rationale” for autonomy in one’s work.¹¹⁰ Autonomy meant that only professionals could judge each other, rather than the lay and other publics.¹¹¹ According to Becker, it was usually only “emerging professions” that claimed their work was “hampered by the interference of laymen who [did] not fully understand all the problems involved, the proper standards to be used, or the proper goals to be aimed for.”¹¹² The model of professionalization that social work leaders gradually

¹⁰⁸ CWC, “Adoption Practice,” (1948): 2; “Adoption Practices,” *Concerning Children* Canadian Welfare Council: Ottawa (II) 3 (July, 1948): 1-3.

¹⁰⁹ CWC, “Adoption Practice,” (1948): 2.

¹¹⁰ Howard Becker, “The Nature of a Profession,” in *Sociological Work: Method and Substance* (New Brunswick, N.J.:Aldine Publishing, 1977 [1970]), 96.

¹¹¹ Greenwood, “Attributes of a Profession,” 49. Greenwood made a similar point, arguing that confidentiality and evaluation by ones peers were two of the privileges associated with gaining a monopoly of judgment.

¹¹² Becker, “The Nature of a Profession,” 97.

aspired emphasized the distinction between clients versus consumers, because the latter “was always right.”¹¹³ Acquiring the image of the professional depended on demonstrating that a profession had a body of theoretical knowledge that justified the privileges that came with a monopoly of judgment, such as autonomy and evaluation by one’s peers.¹¹⁴ From this perspective, social work’s need for interpretation work with the public could be used as a measure of the (in)stability of the profession.

At the same time, the notion of a continuum or stages of achievement toward professionalism downplays the fact that “true” professions, like medicine, at the top of the hierarchy, used their privileges to foster distrust of “emerging” professions and place them under greater scrutiny. Categorizing professions as true, or successful, ignores the relational quality of status claims, and the work that “true” professions are constantly engaged in to secure and maintain their position. It also ignores the various kinds of work that other professions do to prop up full professions. The sole focus on the work of emerging professions, is then used as evidence of their “emerging” character.

Interpretation Work with Unmarried Mothers

Social workers were often asked if they persuaded unmarried mothers to give up their children, a question that frustrated the chief medical social worker of a Montreal hospital, because it showed a “lack of understanding” by “lay people”

¹¹³ The dominant, structural functionalist model of professionalization is outlined by Greenwood.

¹¹⁴ Greenwood, “Attributes of a Profession,” 48.

about the principles of casework.¹¹⁵ As she explained, interpretation work with *unmarried parents* included reaching out to “seriously troubled young people who...badly [needed] skilled help,” and had been “deprived” of it either because it was unavailable in the community, the mother was afraid to expose her secret, or she did not “understand” that adoption workers could “provide wise counsel in a strictly confidential manner.”¹¹⁶

Previously, agencies encouraged unmarried mothers to keep their children but in the mid 1940s they began to focus on children who remained in foster care with no viable plans from mothers. While Ontario Mother’s Allowance (OMA) had been extended to “deserted wives” (after a waiting period of 5-7 years), unmarried mothers were still excluded, a policy regulated by social workers.¹¹⁷ Instead of advocating expanded financial support for unwed mothers, social work leaders proposed changes to adoption policy and practice that hastened formal separation. Changes to adoption practice were based on three grounds, revealing a gendered double-standard: first, while unwed mothers’ retained legal custody that did not translate into “parental responsibility;” second, although women expressed a desire

¹¹⁵ Betty (Kobayashi) Isserman [Chief Medical Social Worker, St. Anne’s Veterans’ Hospital, Montreal], “The Casework Relationship in Work with Unmarried Mothers,” *The Social Worker* 16 (July 1948):12.

¹¹⁶ CWC, “Adoption Practice,” (1948): 2.

¹¹⁷ Margaret J. H. Little, *No car, no radio, no liquor permit: the moral regulation of single mothers in Ontario, 1920-1997* (Toronto, Oxford University Press, 1998); Dorothy Chunn and Shelley Gavigan, “From Welfare Fraud to Welfare as Fraud: The Criminalization of Poverty,” in *Criminalizing Women*, ed., E. C. G. Balfour (Halifax: Fernwood Publishing, 2006), 217-235; Alvin Finkel, *Social Policy and Practice in Canada: A History* (Waterloo, Wilfrid Laurier Press, 2006).

to keep their children, often no plans were in place; and third, when children were moved between foster homes this disrupted relationships.¹¹⁸

The expansion of “psy” discourse was reflected in social workers’ descriptions of the unmarried mother, who had not simply broken a moral code but was now defined as “sick.” She was portrayed as having an inferior, even “morbid,” self-opinion with evidence of illness being that the “healthy girl...protected herself.”¹¹⁹ For, mainly white, middle-class unmarried mothers, the baby was interpreted more as symbolic rather than real, a weapon used against someone in her past. It was supposedly a “well-known fact” that unmarried mothers were “emotionally immature” and came from insecure and often neurotic families, unbeknownst to those who tried to get her to “do the right thing.”¹²⁰ Social workers tried to show that service in public adoption involved more than placement; as a form of therapeutic work it involved helping the unmarried mother “solve the personal problems of which her pregnancy is merely a symbol.”¹²¹

Casework was interpreted as undoing the results of “twisted and neurotic” lives in contemporary society to help “to create and build a new life for our people and our children.”¹²² Given the paucity of resources, it was no surprise that support was often limited to making it more possible for “young people to marry early and

¹¹⁸ Isserman, “Casework Relationship,” (1948): 13-14.

¹¹⁹ Mary Speers, “Case Work and Adoption,” *The Social Worker* 16, no.3 (Feb.1948): 18-19. The same argument was made by Charlotte Whittton who said unwed pregnancy was evidence of feeble-mindedness, based on her observations of the number of working-class and immigrant girls getting pregnant out-of-wedlock. See: Rooke, P. T., and R. L. Schnell, *No Bleeding Heart: Charlotte Whittton, A Feminist on the Right* (Vancouver: University of British Columbia Press, 1987).

¹²⁰ Isserman, “Casework Relationship,” 12.

¹²¹ Phyllis Burns. “Is Our Adoption Policy Sound?” *The Social Worker* 18, no. 4 (April 1950): 3.

¹²² Isserman, “Casework Relationship,” 17.

assume family responsibilities.”¹²³ Nevertheless, by the mid-1950s adoption was viewed as “big business” and there was a public image of the social worker as “baby-snatcher,” explaining why some unmarried mothers still resisted the “generosity of expertise” and assistance of the CAS.¹²⁴

In a report to the board of directors of the CAS of Toronto, the Supervisor of the unmarried parents department acknowledged, she was “afraid there is an impression abroad that social workers *and* adopting parents have become ‘baby snatchers.’”¹²⁵ To allay these fears, she described a case in which a young, middle-class woman and her boyfriend (a law student) were given temporary assistance by the CAS, so that they could plan to care for their child later. The example was also designed to assuage public concerns about class differences between birth mothers and adopting parents, and challenge public perceptions of who the “normal” or typical client in the adoption process was.

Interpretation Work with Adoptive Parents

In 1946, the OACAS published a pamphlet called “The Citizen of Tomorrow,” designed to address some of the public criticisms of social work, such as long-waiting lists of potential adoptive parents and a lack of transparency in adoption procedures. It constructed an image of impatient, would-be adoptive parents, who could not understand why they had to wait so long to adopt a child. These “anxious” couples had heard of babies and children abandoned or removed

¹²³ Isserman, “Casework Relationship,” 17.

¹²⁴ Rose describes the sharing of expertise this way in: Nikolas Rose, “Expertise and the Government of Conduct,” *Studies in Law, Politics and Society* 14 (1994): 359-97.

¹²⁵ Katherine Sutherland, *Report of Supervisor of Unmarried Parents Department to the Board of Directors*, Board/Committee Minutes (1955) (MTA) CAS Fonds 1001, Box 76 Series 531.

from natural parents, who must be awaiting a “loving” adoptive home. The problem, according to social workers, was that “parents desire[d] infants and [were] unwilling to accept older children.”¹²⁶ Readers were told that many children in the care of the Children's Aid Society had special handicaps of a physical nature, or related to personality and behavior. The authors reassured parents that no “reputable” organization would recommend adoption under such circumstances unless the adoptive parents accepted the child's handicap, still insisted on adoption and gave assurance of their ability to furnish special care for as long as may be needed.¹²⁷ Social workers tried to illustrate why the task of placement involved more than matching needy children with willing parents.

The Children's Aid Society viewed itself as a microcosm of society. Through work in adoption, social workers configured normative standards by which, not only potential adoptive parents, but also all parents would be judged;

[I]n reviewing the application for adoption the Society must take into consideration not only the community standing of the applicants, but their personalities, education, interests, religion, the kind of neighbourhood they live in and their ages.¹²⁸

Normal expectations for parenthood and childrearing were based on and reinforced a middle-class definition of family, an ideal in which parents were comfortably “well-off,” married, under forty, heterosexual, white, Anglo-Saxon and Protestant.

¹²⁶ OACAS, *The Citizen of Tomorrow*, (AO) F819 OACAS fonds (1946): 26.

¹²⁷ Ibid.

¹²⁸ Ibid., 28. Similar arguments are made in Mona Gleason *Normalizing the Ideal: Psychology, Schooling, and the Family in Postwar Canada*. Studies in Gender and History (Toronto: University of Toronto Press, 1999) and Franca Iacovetta, *Gatekeepers: Reshaping Immigrant Lives in Cold War Canada* (Toronto, Between the Lines, 2006).

The CWC also expanded the definition of interpretation work to include the “interpretation of the child” to prospective parents, what I suggest is a more direct illustration of the “practical work of heredity.”¹²⁹ The CWC called for the following new minimum standards in adoption practice:

1. Determination of the suitability of the child for adoption by means of physical and psychological examination and by observance of this development.
2. Exploration of the child's medical and social background in as much detail as possible.
3. Competent study of the prospective adopting families with careful consideration given to physical, economic, social and emotional factors involved in the application.
4. *Interpretation of the child* and his background to the adopting parents.
5. Careful preparation for the placement of all parties concerned.
6. Careful supervision by a qualified agency representative for a period of at least six months and frequently longer.¹³⁰

They encouraged social workers to publicize their work and to emphasize the fact that adopting parents who used a recognized agency had better *safeguards*. Even though there was still no guarantee that more children would be available for adoption, what they meant by safeguards was that better plans would be made by unmarried mothers and children would be screened: “[C]hildren would be released for adoption only after the mother had considered all implications carefully and when the child's *suitability* had been determined.”¹³¹

Social workers began to position themselves as co-ordinators at the center of a widening net of research and expertise, referred to by Turmel as the “childhood

¹²⁹ CWC, “Adoption Practice,” 2; Miller, *Blueprint for Defining Health*, 40.

¹³⁰ CWC, “Adoption Practice,” 2. [emphasis added]

¹³¹ Ibid.

collective.”¹³² As part of their ongoing activities in adoption, they circulated and translated scientific findings produced by other members in the collective, but they also contributed to them. Social workers assessed a range of factors, from the child’s spiritual well-being to heritable and medical conditions:

[B]efore recommending a child for adoption the Society secures every available piece of information about his parents, their history, religious affiliation, the child's own mental and physical record, etc.
133

Although environment was privileged in psychoanalytic social work literature, social workers continued to draw on popular ideas in science, reaching back to prior understandings of nature and heredity. Social workers were engaged in practices of boundary work when they circulated “tragic tales” of unregulated adoptions that had ignored the “facts of heredity,” defining rivals as amateurs and pseudo-scientists, who did not understand or have the skill required to make sound adoption placements.¹³⁴ The OACAS presented these tales in the form of narrative case-files, as examples of what was to be avoided:

An application may be refused on account of the applicants' ages. One case is on record of a child adopted by a middle-aged couple. This boy became a brilliant student, but in his first year at high school the adoptive father, then an elderly man, became ill and lost his employment. The boy had to leave school early to maintain his parents. Actually he was of *university calibre* and unquestionably would, under other *circumstances* have become a *professional man*.¹³⁵

¹³² Andree Turmel, *Historical Sociology of Childhood*, []; Whelan, .

¹³³ OACAS, *The Citizen of Tomorrow*, 28.

¹³⁴ Ellen Herman refers to “tragic tales” in *Kinship By Design*; Whelan, *Boundary work and Transgression*.

¹³⁵ OACAS, *The Citizen of Tomorrow*, 28 (AO) F819 OACAS fonds [emphasis added]

The above case suggests the failure was a social one because the “circumstances” were not properly matched to the child's needs and natural inheritance. The message was that careful selection of an appropriate *environment* could be engineered.¹³⁶ In further examples,

[T]he application was refused because the couple, although well educated and comfortably well off, *quarreled frequently*. Another because the *neighbourhood was undesirable* and the would-be *adoptive mother was too busy* with outside interests to give the child adequate care.¹³⁷

The criticism of mothers who had outside interests was not uncommon, engaging what Rayna Rapp called “a much older and enduring morality play” in which the quality control of children, (at least for middle-class women) is provided by nurturance, presumed to be women's responsibility.¹³⁸ Even though social workers themselves engaged in paid employment and had political roots in maternal activism, “working-mothers” and/or women involved in activities outside the home were frequently rejected for adoptive motherhood. The further irony was that social workers were criticized because most did not have children of their own, having made a decision between “career” or motherhood, and their expertise in family relations was questioned as a result.

One of the practical difficulties that social workers faced, as they tried to develop adoption standards, was what sociologists call the tension between flexibility and determinism. The CWC gave voice to this when they proposed that

¹³⁶ OACAS, *The Citizen of Tomorrow*, 28.

¹³⁷ *Ibid.*, 29. [emphasis added]

¹³⁸ Rayna Rapp, “Heredity, or: Revising the Facts of Life,” in *Naturalizing Power: Essays in Feminist Cultural Analysis*, ed. Sylvia Yanagisako and Carol Delaney (New York: Routledge, 1995), 79.

the interpretation of adoption standards needed to be balanced with administrative *flexibility*, as a way to reduce private placements. According to science studies theorist Joan Fujimura, one of the ways that successful practitioners resolve this tension is by developing a “standardized theory-methods package.”¹³⁹ The standardized package included diverse boundary objects inside (such charts and concepts) combined with techniques, to narrow the range of possible methodological practices, without completely determining them. This allows many different people in different contexts to cooperate, with some degree of reliability.

Flexibility remained an ambiguous concept in adoption practice. For the CWC, a public arm that spoke for the profession, it meant increasing “the numbers and kinds of children whom they place for adoption and... the numbers and kinds of families with whom they are prepared to place children,”

There is a need to re-think the prevailing policy of not offering for adoption a child who is handicapped in some way, particularly if there are prospective adopting parents fully cognizant of the child's disability and its implications who can accept and compensate for his limitations. Other questions being raised include—What should the age limit be for prospective adopting parents? Can we accept adoption homes of mixed racial and religious background? How young can we safely place children for adoption?¹⁴⁰

Social workers in local agencies tended to emphasize the importance of emotional and social factors. In interpretation campaigns with doctors they argued that through adoption work they tried to provide the love and care that children were deprived

¹³⁹ Joan Fujimura, “Crafting Science: Standardized Packages, Boundary Objects, and ‘Translation’” in *Science as Practice and Culture*, ed. Andrew Pickering (Chicago: University of Chicago Press, 1992), 169.

¹⁴⁰ CWC, “Adoption Practice,” 3.

of.¹⁴¹ Yet, more children were coming into care and, despite the costs and negative public perception, there was still reluctance on the part of adoption workers to place all children in willing adoptive homes, or with couples in “mixed” marriages. The CWC admitted they had not resolved how *flexibility* could be administered, but returned to a general definition of what the core work of the profession should be; “we must be prepared to *experiment and pioneer*, always mindful of our obligation to *provide* to every child, *security and affection* and to *render* to the community the fullest possible measure of service.”¹⁴²

Interpretation Campaigns

By 1953, the Toronto Branch of the Canadian Association of Social Workers (CASW) had established its own “Interpretation Committee,” showing the rising importance of interpretation work.¹⁴³ One prominent member of the committee, Helen Carscallen, a social worker with years of experience, moved into to full-time interpretation work for the CAS of Toronto, after doing this work for many years.¹⁴⁴ Staff circulars brought various internal and external practices of *written interpretation* together, as a vehicle for feeding stories to popular Canadian magazines. For instance, through staff bulletins Carscallen requested material that could be used to interest readers in older children for adoption;

¹⁴¹ Nora Henderson, "Child Adoption: A Problem for the Doctor and Social Worker," *The Ontario Medical Review* (September 1948): 2 (AO) F819 OACAS fonds.

¹⁴² CWC, “Adoption Practice,” 3.

¹⁴³ Helen Carscallen, "'Arms Are to Hug': A Constructive Approach to Problems of Interpretation," *The Social Worker* (October 1953):12.

¹⁴⁴ *Staff Circular #5* (September 14, 1951) (MTA) CAS fonds Box 90 File #3. It was not entirely clear from the records whether this was a new or expanded position, and what the day-to-day work would consist of; however, the Toronto CAS staff circulars included requests for social workers to give her feedback for ongoing public campaigns.

Material is needed for stories—humorous incidents, interesting hobbies, unique ways of describing feelings and relationships, are all useful for written interpretation. If you have a boy or girl particularly interested in stamp collecting or who is a promising athlete, please pass the word along to Miss Carscallen.¹⁴⁵

She also solicited feedback from social workers about their response to recent articles in popular magazines; "Miss Carscallen would like to hear about reactions, pro and con, to the article 'May Nicholls and her Borrowed Brood', written by Sidney Katz in September *Maclean's*. Suggestions as to a ten year old boy in our care, who might be written up by the same author, would be appreciated."¹⁴⁶ She advertised an upcoming "soap opera" and radio broadcast, which was going to tell the story of a couple adopting a handicapped child from the CAS, which she considered an "authentic interpretation of a social worker."¹⁴⁷

Written interpretation included press releases to local newspapers, which, in turn, were collected and placed in CAS scrapbooks and files for historical records and archives. The significance of the popular press to social workers is indicated by the surfeit of clippings saved and archived in folders by adoption workers. Newspaper and magazine stories were frequently cited for recommended reading in local CAS staff bulletins; for example, in the Metro Toronto CAS' staff circular, they were part of a regular section called: "You Should Know."¹⁴⁸ This suggests a deeper awareness of the dynamic and ongoing relationship between themselves and the public.

¹⁴⁵ *Staff Circular #5*, September 1951 (MTA) CAS fonds 1001 Series 536.

¹⁴⁶ *Ibid.*

¹⁴⁷ *Ibid.*

¹⁴⁸ *CAS Bulletin* (MTA) CAS fonds 1001 Series 536.

Research studies and reports were another significant form of interpretation. They were undertaken by social work theorists, practitioners, graduate students, professional social work societies, other social welfare researchers, and social workers now bureaucrats, often in collaboration with each other. Most of the studies and reports were mailed to community and board members of other social agencies, and individual social workers working in the CAS' of Ontario. Reports were mailed to social agencies in other parts of the country as well as in the U.S. For example, the Toronto Welfare Council's 1943 *Study of the Adjustment of Children of Unmarried Mothers* was considered, in the United States, to be "the most outstanding report ever compiled on the problem of the illegitimate child."¹⁴⁹

Research findings and literature moved freely between both countries, and experts from the United States (particularly New York welfare officials) were regularly cited as distinguished authorities on adoption practice, in Ontario social work literature.¹⁵⁰ Herman describes four major types of research studies that social workers participated in and drew on before and after WWII as an extension of eugenics research: nature/nurture studies, outcome studies, predictive studies, and field studies.¹⁵¹ She suggests they reflected the fears shared by professionals and policy-makers, and explains their reluctance to advocate adoptions.

¹⁴⁹ Minutes of Board of Managers Minutes (1930-1951) (MTA) March, 1942 Fonds 1404 Series 855, File #4.

¹⁵⁰ For example in the *Adoption Department comments on Survey Report*, the author refers to many "well-known authorities in the Child Welfare field" including: Miss W.M. Kelley, PhD. Catholic Home Bureau; Miss L. Young, Asst. Professor of Social Work, N.Y. School of S.W; and Miss. D. Hutchinson, New York School of Social work. OACAS Files, (1951): 6. (MTA)

¹⁵¹ E. Herman <<http://darkwing.uregon.edu/~adoption/studies/index/html>. July 20, 2005.

Government officials as well as social workers engaged in various forms of interpretation work as they consumed, interpreted, and extended the reach of research studies, particularly nature-nurture studies. In 1955, Ontario's Deputy Minister of Child Welfare, James Band, sent copies of two booklets produced by the American Medical Association, called "Adoption" and "Sources of Personality," to every CAS in Ontario.¹⁵² Most of the local directors sent letters to the Deputy Minister, thanking him for his "kindness" and "thoughtfulness," saying they were always seeking new sources of information for their staff and adopting parents. One praised the fact that it was written in "laymen's" language and many requested additional copies to give to parents. One CAS director argued it was valuable because: "[I]t interprets well the importance of agency placements as against private as well as environment vs. heredity."¹⁵³ One letter came from a lawyer in Caledonia Ontario, showing the reach of interpretation work by government officials and growth of the network.¹⁵⁴

As Carscallen explained to member of her profession, the "problem of interpretation" had three parts: (1) a need for more knowledge about the "principles of the prevention of social disease," (2) a need to better understand the points of view of others, and, (3) "a knowledge of the techniques of bringing the principles of social work practice in understandable terms to the public...perhaps our greatest need," in other words, informing various publics about the "product" social workers

¹⁵² American Medical Association. *Adoption*. 1955 [1948]. *Sources of Personality*. 1955 [1948] (AO) Deputy Minister's Files, RG 29-01-1-622. .

¹⁵³ [AO] RG 29 Files.

¹⁵⁴ [AO] RG 29 Files.

had to “sell.”¹⁵⁵ She insisted that the profession had to keep all those on whom they are dependent well-informed, including their clients, civic and provincial authorities, and other professionals in the fields of “medicine, psychology, psychiatry, law, teaching, and the ministry for their increasing contribution to our body of knowledge.”¹⁵⁶

With these goals in mind, the members of the interpretation committee proposed two strategies: to hold public meetings with target audiences and develop interpretation “campaigns” aimed at medical professionals in large urban centers. Other target audiences included business members, journalists, professionals and the general public, and the aim was to measure public attitudes and understandings of social work as a profession and of “social workers as people.”¹⁵⁷ The meetings would be “tape-recorded” and followed by group discussions so that findings could be used to plan “techniques of interpretation” to deal with particular attitudes. Social work leaders reasoned that interpretation campaigns were necessary because, “[T]here may sometimes arise definite misunderstandings around adoption procedures and placements.”¹⁵⁸ While the explicit goal was education, they were also one of the means that social workers used to establish shared jurisdictional authority over adoption within the informal workplace.

Carscallen described a typical campaign, in which professional goals were aligned. The CAS arranged for a well-respected member of the medical profession

¹⁵⁵ Helen Carscallen, “Arms Are to Hug!: A Constructive Approach to Problems of Interpretation,” *The Social Worker* (October 1953):12.

¹⁵⁶ *Ibid.*, 12-13.

¹⁵⁷ Carscallen, “Arms Are to Hug,” 13.

¹⁵⁸ *Ibid.*, 15.

to "write an article on the work of the agency from her professional point of view" and for a member of the legal profession to write about adoption law. A series of letters from "the medical man who was the chairman of the Board's Health Committee" was sent to local physicians, describing a doctor who "appropriately referred" an unmarried mother to an agency for help with an adoption. These stories were not simple prescriptions; social workers were engaged in the process of enrolling doctors and the public. Doctors had more cultural authority than social workers and the stories were meant to elicit voluntary professional cooperation from physicians by suggesting it was in their best interests to be part of a network, "[T]he doctor was relieved of a great deal of responsibility, and yet was recognized as a prominent member of the team that helped this mother and child."¹⁵⁹ Similar campaigns were used in the United States and initiated in the 1940s by the OACAS.¹⁶⁰

Popular interpretation campaigns involved the use of parallel narratives, written by social workers and doctors for audiences of social workers, professionals, adoptive parents and the community. In 1948, the executive secretary of the OACAS, Nora-Frances Henderson, contributed an article in the *Ontario Medical Review* entitled "Child Adoption: A Problem for the Doctor and the Social Worker."¹⁶¹ A corresponding article, written by a local doctor and distributed to social workers at

¹⁵⁹ Carscallen, "'Arms Are to Hug',"15.

¹⁶⁰ Carscallen, "'Arms Are to Hug',"15; OACAS, *The Citizen of Tomorrow* (1946): 26-28.

¹⁶¹ Nora-Frances Henderson, "Child Adoption: A Problem for the Doctor and the Social Worker," *The Ontario Medical Review* (September 1948):1 (AO) F819 OACAS fonds; W.R. Webster, M.D. Hamilton, Ontario "Child Adoption" in *Foundations First*. Vol. 2 (2) Simcoe County Children's Aid Society, July 1948 (AO) F819 OACAS fonds.

the CAS, appeared within the same year.¹⁶² Henderson also produced a series of articles in a community newsletter called "Your Children's Aid Society: A Community Responsibility."¹⁶³ Although addressed to the community, it was a way to reach social workers still ambivalent about adoption.

Henderson used the first newsletter to describe how the goals of social service work had changed over the past twenty years. Previously, the CAS and social workers questioned the "removal of children from their homes," because many social workers shared the belief with the wider community that "nothing can compensate a child for his own home."¹⁶⁴ Describing previous cultural sentiment, she wrote:

You may replace dirt with cleanliness, beer with lemonade, all sorts of sins and frailties with virtues and strengths, but since mother and father love can be and often is present with dirt and too much beer and many shortcomings you cannot replace *that* for some little wistful boy or girl by a neat entry on the books of the Children's Aid Society and even the best and kindest of foster homes. In other words, life is like that—inconsistent and queer, yes, but it is as it is!¹⁶⁵

Next, she defended their expense to the public purse. She addressed public criticism that the CAS placed children in care simply because it was easier—an unjustifiable cost to taxpayers. She countered these claims with an updated history of social work that emphasized the new sciences of human relations.¹⁶⁶

¹⁶² Webster, "Child Adoption."

¹⁶³ Nora Frances Henderson, "Your Children's Aid Society: A Community Responsibility," (AO) F819 OACAS fonds.

¹⁶⁴ Nora Henderson, "Your Children's Aid Society," Article 1 (1947): 3 (AO) F819 OACAS fonds.

¹⁶⁵ Henderson, "Your Children's Aid Society," Article 1 (1947): 3 (AO) F819 OACAS fonds.

¹⁶⁶ *Ibid.*, 3.

Subsequent articles described the obstacles that social workers faced and explained why there were such lengthy waiting periods. Henderson used humour as a rhetorical device telling the story of public “misunderstandings” about the “regular epidemic of adoptions” on her street four years earlier.¹⁶⁷ As she explained, people were not aware that the couple who started “the trend” had been patiently waiting for two years. Once they received a baby other married couples in the neighbourhood decided they wanted to adopt too. These other couples found themselves waiting a long time while it appeared “the C’s had got their baby apparently overnight.”¹⁶⁸ Henderson described “feverish mothers” “pouncing” on Mrs. C. as she wheeled her new baby out during the day, but concluded on a promising note: that “all three sets of importunate parents are now to be seen perambulating their respective babies on the street and we have peace (of a kind) again.”¹⁶⁹

In many respects, babies appeared to be one more consumer product, with parents unflatteringly portrayed as customers who could satisfy their need elsewhere. But Henderson tried to check the impatience of potential adoptive parents, while educating them, saying of clients: “Thank goodness” they are, “the dear good people!”¹⁷⁰ She reminded them that if their demands were all so easily met, it would have to mean there were more unfortunate “little ones without their own mothers and fathers to love and care for them. See what I mean?”¹⁷¹ Paradoxically, the underlying message was that adoption was still considered second best. What’s more, many of

¹⁶⁷ Henderson, “Your Children’s Aid Society,” Article 5 (1948):1 (AO) F819 OACAS fonds.

¹⁶⁸ Henderson, “Your Children’s Aid Society,” 5 (1948): 1(AO) F819 OACAS fonds.

¹⁶⁹ Ibid. 2.

¹⁷⁰ Ibid.

¹⁷¹ Ibid.

the children who came into the care of the Society were considered unadoptable through a self-fulfilling logic. Firstly, because they were beyond the “popular age” for adoption, many “fine” children from three to six years old were excluded; secondly, “no Society will offer children for adoption unless it has made a complete investigation as to *his or her background* and suitability for placement...[and finally] the Society will also be anxious to know something of the *background of the family* in which the child is being placed.”¹⁷²

Many adoptive couples found investigation of their own lives and homes disagreeable, but Henderson assured them it was part of the CAS’ responsibility to the child and themselves. The scrupulousness of social workers in determining the suitability of adoptive homes would be matched by their concern for the child's suitability. Social workers came close to promising a product guarantee, which helped to undermine their authority; “[I]n this way, couples desiring a child may secure one for adoption with the utmost confidence. The two-year period of adoption probation is a further protection to both adoptive parents and child. It is the 'easing in' safeguard.”¹⁷³

Another narrative strategy seized upon by social workers was the use of “tragic tales” to illustrate the “pitfalls” of the private adoption route, against which scientific adoptions were posed. Stories of unregulated and failed adoptions were a regular part of interpretation campaigns. Even though laws were introduced that made it mandatory in Ontario, and most other provinces, for child welfare authorities

¹⁷² Ibid.

¹⁷³ Henderson, “Your Children's Aid Society,” no. 5 (1948): 2 (AO) F819 OACAS fonds; Greenwood, “Attributes of a Profession,” 48-51.

to recommend adoptions through a judicial process, some parents and professionals operated around it. But as Henderson warned, it was only the “ill-advised” couple, having grown impatient, who tried to “short circuit their Society;” and “[T]he great majority of doctors and lawyers cooperate with the Society because they understand, one from the medical and the other from the legal aspects, what dangers lie in the paths of those who are able to get a baby quietly with no red tape and no questions asked.”¹⁷⁴

The CWC literature described reasons why unmarried mothers and adoptive parents might choose hasty private placements over public agency services, mostly to do with red tape, and then showed why professional, public services were justified. Firstly, the availability of adoptive infants was strongly related to the “problem” of unmarried parents, but it was not always possible to reach these “girls.” [sic] Many of them preferred to deal with “individuals or groups who promise quick disposition of the baby with no red tape and no questions asked. Sometimes there is a *tragic outcome* for mother, baby, or adopting parents.”¹⁷⁵ The second temptation was linked to families wanting to adopt. They resented long waiting lists and what they perceived of as “unnecessary investigation[s].” After responding to the call for more foster care parents, they still could not get a child. Finally, the preference of a majority of parents for “a very small infant, for their personal satisfaction and in the

¹⁷⁴ Henderson, “Your Children's Aid Society,” no. 5 (1948): 3-4 (AO) F819 OACAS fonds.

¹⁷⁵ “Adoption Practices,” *Concerning Children* Canadian Welfare Council: Ottawa (II) 3, (1948) 1-3. [emphasis added] A 1948 publication distributed to the OACAS by the child welfare division of the Canadian Welfare Council (CWC) in Ontario, (AO) OACAS fonds Series F819 (1948) 1.

child's interests too" drove them to "simpler" transactions in the grey market with a "lawyer, doctor or a private individual."¹⁷⁶

Social workers used narrative case files to illustrate three dangers associated with unregulated, private adoptions: the unknown background and medical histories of children or their mothers, the return of the "true" mother, and legal challenges to the estate. In one example, an adoptive couple fell into deep "despair" after they later found out that their baby girl had a congenital heart condition and would not live long. Henderson said the parents experienced more "loneliness" than before she arrived in their lives. In the second case, the "natural" or "real" parents' consents were not given and the child was not properly "secured." Finally, she warned, if a couple died before securing their child through an "approved and safe process" other relatives might be able to claim the inheritance that they hoped would pass to their adopted son or daughter. Her final word of warning was "Don't short-cut or advise any friend to short-cut the *protective machinery* set up for adoption in this province. It does not pay. It has been built up and strengthened and improved by earnest, experienced and competent people."¹⁷⁷

According to Ellen Herman, these mechanisms helped to establish the new "rules for realness" meant to authenticate adoptive families, because they continued to be perceived as, or were presumed to be, "artificial" substitutes.¹⁷⁸ Indeed, Henderson recommended Frances Lockridge's book "Adopting a Child" to parents

¹⁷⁶ "Adoption Practices," *Concerning Children*, 1.

¹⁷⁷ Henderson, "Your Children's Aid Society," no. 5 (1948): 4 (AO) F819 OACAS fonds.

¹⁷⁸ Ellen Herman, "Rules for Realness: Child Adoption in a Therapeutic Culture," *Society* 39 (January-February)(2002a): 11-18.

and the wider community, an American publication that influenced child welfare agencies in both countries. She claimed it was guided by the "basic procedures necessary when men and women step *in the place of Mother Nature*."¹⁷⁹

Interpretation campaigns were justified because parents criticized the "extreme caution exercised by Societies in adoption."¹⁸⁰ To many, it appeared that the CAS was manufacturing unreasonable childrearing conditions, impractical to the average family. Henderson argued that adoption was entirely different. She drew on the narratives of progress and science, and therapeutic discourse to suggest nature could be enhanced; "In the case of adoption the Society, knowingly, stands in the place of *destiny*. It is a tremendous responsibility and the *ideal* must at least be reached for."¹⁸¹

There was still ambiguity about who social workers served and it remained a tension in adoption. Henderson emphasized that their first responsibility was to children because they were the "CHILDREN'S Aid Societies." But this was not meant to exclude the protection of the adopting parents; "[T]his is the safeguard that is increasingly valued and is steadily removing any *shade of embarrassment* or *apology in the attitude of couples* who some fine morning present a little adopted son or daughter to the neighbours."¹⁸²

¹⁷⁹ Henderson, "Your Children's Aid Society," no. 5 (1948): 4 (AO) F819 OACAS fonds [emphasis added]

¹⁸⁰ Ibid.,3.

¹⁸¹ Henderson, "Your Children's Aid Society," no. 5 (1948): 3 (AO) F819 OACAS fonds.

¹⁸² Ibid.,3 [emphasis added]; Deputy Minister's Correspondence: Adoption. "Contentious Issues," RG 29-01(1940-1950).

Ironically, the success of public interpretation campaigns produced new problems. One social worker warned that adoptive couples were still not being “satisfied by an authorized agency.”¹⁸³ The psychoanalytic focus in social work literature had given more attention to the “emotional pain” of childlessness; therefore, it was not a surprise when foster parents, who were denied children for adoption, developed negative attitudes towards social workers. Parents described themselves doubly pained, because they could not have children of their own and were denied children to adopt. Many of these childless couples were treated as the “solution” to foster care, as agencies pressed them to feel an obligation as foster parents.

Social workers who rejected parents were accused of “playing God” rather than standing in for god or nature, as they were apt to imply. Burns recommended the profession expand the definitions of suitable children and suitable adoptive parents while being careful to remember that “interpretation work” was the right and responsibility of adoption workers.¹⁸⁴ She warned social workers to take stock of their own professional survival by paying attention to growing public distrust and by working to standardize adoption practice. Social workers had to address the paradox of maintaining high standards, while “satisfying customers” and appearing to serve children’s needs. Prospective parents complained about too much “red tape,” too “few children and fewer infants to adopt, the number of children in institutions, and the lack of transparency when social workers rejected parents. These issues,

¹⁸³ Phyllis Burns, “Is Our Adoption Policy Sound?” *The Social Worker* 18, no.4 (April 1950):1-2.

¹⁸⁴ Burns, “Is Our Adoption Policy Sound”? 3.

according to Burns, “unfairly,” though not unjustifiably, created a “dog in the manger” attitude toward child welfare agencies.¹⁸⁵

The Practical Work of Heredity: Social workers and Other Professionals

Doctors and social workers promised to provide another kind of security that had to do with bringing a stranger into the family and harkened back to older eugenic ideas about racial, cultural and class mixing. In 1948, the Simcoe County CAS circulated an article by a local doctor in their publication called *Foundations First*, in which he weighed in on the issue of adoption in an early interpretation campaign. The editors introduced the article saying it described the “many dangers and complications which could readily be avoided...inherent in the placement of children, presumably for Adoption, by other than this authorized Agency.”¹⁸⁶ The doctor wrote in support of the authority of the CAS, saying he could not speak too highly of the services provided by the agency. With an avuncular style, he offered advice to physicians and potential adoptive parents, drawing on a popular advertising slogan, “Open Your Home To a Child,” and reassured parents that many “pitfalls” in adoption could be “hurdled” by the CAS. He outlined the many advantages to couples who “wisely proceeded” through a recognized CAS.¹⁸⁷

Historians have shown how parental expectations, or perceived expectations shaped adoption practice, but professionals also sanctioned these expectations.

¹⁸⁵ Ibid., 2.

¹⁸⁶ Simcoe County Children's Aid Society, Editorial board, “Child Adoption” *Foundations First* 2, no.2 (July 1948): 1 (AO) F819 OACAS fonds.

¹⁸⁷ Dr. Webster, “Child Adoption,” (July 1948) (AO) F819 OACAS fonds.

Webster counselled audiences that social workers offered greater security because they were experienced at interviewing birth and adoptive parents, skills that helped to ensure the “proper fit” of baby to household. At the same time, his examples contradicted the CAS’ new policy of “homes for children” versus “children for homes;”

[A] tall blonde couple would not wish to have a short, dark-complexioned child; nor would they wish to have a child whose intelligence was far below their own. Here again is where the Children's Aid comes to the rescue, because they have all the *facts*.¹⁸⁸

In the 1947 Annual Report of the CAS of Halton County, social workers claimed:

There is a steady demand from prospective foster parents for infants to adopt, as a rule from infancy to two years of age. *Naturally these parents are desirous* of getting a child physically and mentally sound and with a reasonably good family background. The applications today far exceed the infants available for placement, and as a result we have many applications in abeyance.¹⁸⁹

Dr. Webster pointed out another very "distinct advantage" when couples proceeded through a public agency: the probation period. At that time, prospective parents had two years before they had to sign final adoption papers, allowing time for them and others to evaluate the child’s development;

If, by some unforeseen circumstance the youngster does not *fit into their home*, the Children's Aid assumes full responsibility. However, with the careful scrutiny given both the child and the prospective parents, such a complication rarely arises.¹⁹⁰

¹⁸⁸ Ibid. [*emphasis added*]

¹⁸⁹ Children's Aid Society of the County of Halton, "Adoptions" in *Annual Report* (March, 31, 1947): 5. [*emphasis added*] (AO) RG 29-01 Deputy Minister’s files “Annual Reports of the OACAS.”

¹⁹⁰ Webster, “Child Adoption,” 1 (AO) F819 OACAS fonds. In chapter five I describe a case that contradicted the assumptions on which this was based--the case of Lily.

Social work leaders reminded parents as well as social workers that taking a child into their home was not “an adoption;” it was more accurately defined as the waiting period known as *adoption probation*. The probation period allowed time for parents to change their minds, a virtual product guarantee:

[T]ime for adjustments on the part of all concerned, awaiting the *development of the child* and the definite decisions of the parents that they wish to give the child their *family name* and have him *as their very own*. The *love* and *affection* given these children, and the *pride* of the parents in their child is most gratifying to the Social Worker and compensates to quite an extent for some of the sordid situations with which we have to deal.¹⁹¹

Dr. Webster drew on his own practical experience and cultural authority to “driv[e] home” the pitfalls of private adoption placements, saying that family physicians were often approached by couples wanting to adopt a baby, but they had not usually “given serious thought to heredity and inherited weakness.”¹⁹² He admitted that most doctors *did* know of babies available for adoption but warned that when this private route was taken “should something develop in a child in a month or a year, the parents have to assume complete responsibility.”¹⁹³ One of the key differences between public and private adoptions was the protection that a probation period offered as the agency assumed responsibility for children during this time.

Although it was not clear how many adoptive parents shared his concerns about heredity and developmental potential, “failed” adoptions were reported despite efforts to rationalize practices. Webster argued that a positive outcome was more

¹⁹¹ Children's Aid Society of the County of Halton, "Adoptions" in *Annual Report* March, 31, 1947, p.5. [*emphasis added*] (AO) RG 29-01 Deputy Minister's files "Annual Reports of the OACAS."

¹⁹² Webster, "Child Adoption," 1 (AO).

¹⁹³ *Ibid.*

likely when the CAS handled the placement. The CAS used the "full force of [their] experience" and consulted other professionals for their expertise, to investigate areas invisible to the untrained eye:

The child's parents, legitimate or illegitimate are questioned; *their educational, social, and hereditary backgrounds are scrutinized.* The child is, in turn, examined by competent Doctors, so that no physical abnormality is overlooked; examined by psychiatrists so that its mental status is determined, and finally, the sum total of these findings is carefully screened. Now the baby is ready for adoption into the proper home.¹⁹⁴

While social workers used the professional authority of doctors, in interpretation campaigns, they did not see themselves as simply handmaidens to medical experts.

Henderson's own article to the *Ontario Medical Review* in September 1948, entitled "Child Adoption: A Problem for the Doctor and the Social Worker," framed the new problem of child adoption as one shared by interdependent professionals.¹⁹⁵ She elevated the status of social work, positioning social workers as equals not subordinates. She described doctors as "well-intentioned" but unable to keep up with the many complications that arose in adoption, arguing that a number of headaches could be avoided if doctors utilized the skills of qualified social workers:

Canadian social workers have good cause to be grateful to medical science and to the unselfish service of doctors in many phases of welfare work; but none more than in the field of child protection. In every community today one finds the physician, the surgeon, the psychiatrist and the social worker joining cause in [sic] behalf of the child. Increasingly the Children's Aid Society has been trekking to the hospital laboratory, the clinic and the family physician. Increasingly the medical profession has been turning to the professional social workers for relief and guidance in many a

¹⁹⁴ Ibid., 2.

¹⁹⁵ Henderson, "Child Adoption: A Problem," 1 (AO) OACAS fonds F819.

problem which in former years the family physician had to accept as 'his headache.'¹⁹⁶

What was previously a private occurrence or “headache” was reinterpreted as a collective or inter-professional problem. The solution was for social workers and doctors to work together to estimate a child's potential and "future development,"

"[N]o Children's Aid Society today dreams of placing a child for adoption until he has had a thorough medical examination and until it has secured, wherever possible, a medical as well as social history of the parents."¹⁹⁷

She reminded doctors that the social worker had final jurisdiction over placement, but their combined, interdisciplinary effort was the best means possible for obtaining "an *honest picture* of his background [so] that the best possible placement can be made."¹⁹⁸

Henderson tried to persuade adoptive parents that professionally managed adoptions were safer, arguing it was only the "rare doctor who does not turn as a matter of course to the local Children's Aid Society when he is asked to place a baby."¹⁹⁹ She said doctors understood the Adoption Act and the responsibility imposed on social workers, learning the hard way about the "repercussions of haphazard placements;" they were no longer willing to accept the responsibility of "obliging" patients "who want a baby adopted out and, on the other, a couple who

¹⁹⁶ Henderson, "Child Adoption," 1-2 (AO) OACAS fonds F819.

¹⁹⁷ Ibid.

¹⁹⁸ Henderson, "Child Adoption: A Problem," 1 (AO).

¹⁹⁹ Ibid.

'want a baby.!' "²⁰⁰She described the case of a physician approached for help by one of his patients, who wanted to place her baby with relatives,

He suggested an interview and a few days later a prosperous couple in a *de-luxe car* came to see him. They had all the *appearance* of well-to-do kindly people. Perhaps they were that! But fortunately this doctor was not satisfied with *appearances*. He placed the matter in the local Society's hands for a discreet investigation, which revealed that both husband and wife were in the *bootlegging* business and the man had already served a jail term! ²⁰¹

Cases like this were meant to show that social workers went beneath surface appearances to measure hidden social factors, in the same way that medicine had its own ways of looking for the hidden cause of illness and disease.

Either by coincidence or design, during the same year, in an article for *Saturday Night Magazine*, Charlotte Whitton warned readers about the "bootlegging" of children in black-market, cross-border adoption scams.²⁰² She described how individuals were pretending to adopt children in Canada, only to escort them to potential couples waiting in the United States, willing to pay money for children. The problem with cross-border adoptions for social workers was that it made it near impossible to ever locate the children again, or to provide adequate follow-up. Public anxiety about the loss of "Canadian" children, through unscrupulous, black-market adoption rings, was reflected and heightened by national newspaper stories, and helped to spur adoption campaigns.²⁰³

²⁰⁰ Henderson, "Child Adoption: A Problem," 1 (AO) OACAS fonds F819 .

²⁰¹ Ibid.

²⁰² Charlotte Whitton, "Better Adoption Controls Needed When Babies Cross Borders," *Saturday Night* (June 12, 1948) (AO) F819 OACAS Box 17.

²⁰³ *Montreal Herald*, February 15, 1952. See "\$1 Million Baby Farm Ring Broken", *Montreal Gazette*, February 6, 1952. *Toronto Star*; Bette Cahill, *The Butterbox Babies: New Revelations 15 Years Later* (Halifax: Fernwood Publishing, 2006 [1992]). See also: Karen A. Balcom, *The Traffic in Babies: Cross-Border Adoption and Baby-Selling between the United States and Canada, 1930-1972* (Toronto Buffalo London:

In two further cases, described by Henderson, the doctors involved in placing children privately were not as lucky because the Children's Aid Society was not "given the chance" to help. In the first case "a *soldier's wife* whose husband had been overseas for two years, gave birth to a child." A "kindly doctor" placed the baby with a "fine couple," but when the foster parents tried to adopt the child, with the help of the local Society, they hit a snag and could not finalize the proceedings. As a married woman, the birth mother was not legally entitled to "give away" her child without her husband's consent "even though he was not the father!" As Henderson put it, "[T]he complications here are obvious. Many a man under such circumstances separates from or divorces his wife and refuses to have any part in facilitating the adoption of her child."²⁰⁴ Henderson did not explain how the CAS might have handled this particular situation differently, given the legal requirement that husbands had to grant consent; instead, the story was used to warn parents and doctors about the danger of taking things into their own hands.²⁰⁵

The final case, described by Henderson, was used to emphasize the differences in how physicians versus social workers interpreted placement, illustrating the subtle social work skills involved. Because it is an evocative example of interpretation work, as the "practical work of heredity," I quote it here at length:

University of Toronto Press, 2011).

²⁰⁴ Henderson, "Child Adoption: A Problem."

²⁰⁵ In my MA research I was told of a similar case at the Easton CAS, in which a soldier returned home after WWII and mid-way through a meal with his wife and children he counted an extra head at the table. The child, in this case, was put up for adoption.

One good-hearted doctor placed a child of ou[t]standing *heritage* with a fine elderly couple, but *mentally and socially in a different stratum* to that of their adopted boy, who early showed signs of being *exceptionally brilliant*. Now the adoptive parents are growing older, their economic position is poor and the boy will likely have to leave school early to support them. It so happens his natural parents eventually married each other and the father joined the Canadian navy and has been decorated for *gallantry*. He is a father any boy might be proud of and the mother is a *fine type* of business woman. Their first thought was to take their child back, knowing he was not legally adopted, but they realized the unfairness of doing so. The local C.A.S. sees in this unhappy situation a lost opportunity for good case work. An intelligent, sympathetic social worker [could] have provided a steadying influence when panic led a *fine* woman to forever cast off her child. Help and advice would have been given, the couple encouraged to marry and a good temporary home found for the child until his own home was established.²⁰⁶

The example provides an illustration of two keywords identified with adoption practice: "under-placement" and "over-placement."²⁰⁷ Social workers referred to cases like the one above as a problem of "under-placement," meaning a child with a high IQ was placed in a "mediocre" (read working-class) environment. The converse, or "over-placement," meant placing a "mediocre" child with a family who had unrealistically high expectations (read upper-class or highly educated parents). These concepts together with "matching" techniques were the earliest attempt at adoption standardization and the formation of a "standardized theory-methods package."²⁰⁸

During the period between 1940-1960s Canadians relied on the agency process for adoption in greater numbers than ever before. Social workers played a key role in this social trend. They were instrumental in producing a system of public

²⁰⁶ Henderson, "Child Adoption," 2 (AO) OACAS fonds F819. [emphasis added]

²⁰⁷ Phillips, *Blood Not Thicker*.

²⁰⁸ Fujimura, "Crafting Science: Standardized Packages, Boundary Objects," 169; Herman, *Kinship by Design*.

and state-regulated adoption, in part by interpreting their work to the wider public. Interpretation work involved educating the public, themselves, and other professionals, and justifying the value of their work to different audiences. But there was also growing recognition that boundary-work was necessary to form alliances with other knowledge-based professionals if social work was not to be subsumed by others. They began to create a scientific and standardized adoption protocol that professed to protect adopted children and ensure healthy adoptive families. In turn, adoption work proved vital to social work's ongoing effort to define itself as a professional practice unique from others, and social workers as knowledgeable subjects, who had a legitimate form of expertise.²⁰⁹

Social work historians contend that the intense focus on professionalization after WWII led to growing conservatism within mainstream social work.²¹⁰ Leaders in the profession concentrated more on the development of social casework techniques, methods, and theoretical knowledge, thereby, forsaking their roots in social activism. The growing influence of Freudianism and “psy” knowledge in social work, particularly in adoption, helped to deepen a commitment to individual rather than structural solutions to social problems. Social workers tried to establish themselves as scientific through adoption, strengthening their relationship to the therapeutic State rather than posing any significant challenges to it. Social work

²⁰⁹ Abbott, *The System of Professions*; Stuart Kirk and William J. Reid, *Science and Social work: A Critical Appraisal* (New York: Columbia University Press, 2002).

²¹⁰ Theresa Jennissen and Colleen Lundy, *One Hundred Years of Social Work: A History of the Profession in English Canada 1900-2000* (Waterloo, ON: Wilfrid Laurier Press, 2011).

discourse became part of “normal science” and psychological concepts moved beyond the human sciences to become a matter of fact in policy making.²¹¹

Psychiatric discourse has pervaded the realms of “work, family, and social policy,” and the two disciplines of psychiatry and psychology have been influential in matters of child welfare.²¹² Experts from these disciplines claim to have specialized knowledge about child development, but also to be able to diagnose and distinguish normal from pathological mental health in the population more generally.²¹³ According to Mosoff, the “same voice of authority that pronounces a woman as mentally disordered” can also forecast “the risk for her child’s well-being.”²¹⁴

I argue that social workers were co-participants in this process. Rather than challenging the predictive assumptions of psychiatry and psychology, they extended the reach of “psy” knowledge through their own claims-making activities in adoption. In the next chapter I show how social workers continued to map out the boundaries of their work, trying to establish themselves as co-ordinators of an adoption knowledge network and constructing an interpretative framework that measured and determined a child’s *adoptability*.

²¹¹ Stephen Ward, “Filling the World with Self-Esteem,” *Canadian Journal of Sociology* 21, no.1 (Winter 1996): 1-20.

²¹² Judith Mosoff, “‘A Jury Dressed in Medical White and Judicial Black’: Mothers with Mental Health Histories in Child Welfare and Custody,” in *Challenging the Public/Private Divide*, ed., Susan B. Boyd (Toronto: University of Toronto Press, 1997), 229.

²¹³ Ibid.

²¹⁴ Ibid.

Chapter Five

A Framework of Substance: Translation and the Concept of Adoptability

The fairy tales warn us that there is no such thing as standard size -- that is an illusion of industrial life -- an illusion farmers still struggle with when trying to supply uniform vegetables to supermarkets ... no, size is both particular and subject to change.¹

Jeanette Winterson *Why Be Happy When You Could Be Normal?* 2012

Social workers offered to make the welfare state more efficient by developing scientific standards to diminish the uncertainties of adoption. They invested in a model of professionalization and the valued social identity of the professional to secure their authority and legitimacy, in order to carry out their occupational tasks. They argued that only the professional services of social workers could increase the number of adoptions, minimize adoption breakdowns, and reduce the number of children in government care. Even though the CAS had gained administrative authority to regulate families and interpret child welfare law, social workers still had to justify their work and defend their expense to the public purse.

Social workers in the CAS had to balance competing demands from community boards, public bureaucrats, and government officials, while facing mounting criticism from frustrated parents on adoption waiting lists. They described structural constraints such as staff shortages, a need for more qualified social workers, and inadequate funding from the province and municipalities. They aligned

¹ Jeanette Winterson, *Why Be Happy When You Could Be Normal?* (Canada: Vintage, 2012), 35. In her memoir, Winterson describes the importance of stories in this existential journey of growing up as an adoptee, coming out as lesbian, and coming to writing--in a working-class, evangelical family in small town England during the 1950s-60s.

themselves with psychology and psychiatry, and positioned themselves in the “realm of science and medicine” to strengthen their own claims because these “enduring networks,” made some meanings and practices more “sayable” or “likely than others.”²

In order to rationalize adoption, social work leaders began to develop scientific adoption standards, as a way to unify agency practices and produce measurable outcomes. But, as I will argue, they did more than give the appearance of objectivity. Occupational leaders argued that standardization, regulation, and accountability distinguished public agency practices from religious and other private practices. *Standardization* was one of the keywords that social workers used to describe their own goals and link them to modernization. As Herman writes, both ordinary people and professionals began to assume the values of prediction and planning as a cultural good. Standardization was considered by them to be an “exemplary” principle of modern government and standardizing practices transmitted the idea that “[P]ublic procedures should be consistent and transparent, never idiosyncratic.”³

But as science studies theorists suggest, developing standards is more than a public relations exercise; the practical, material work of developing classification systems changes the world “such that the system’s description of reality becomes

² Judith Mosoff, “A Jury Dressed in Medical White and Judicial Black”: Mothers with Mental Health Histories in Child Welfare and Custody,” in *Challenging the Public/Private Divide*, ed., Susan B. Boyd (Toronto: University of Toronto Press, 1997), 230; Susan Ormrod, “Feminist Sociology and Methodology: Leaky Black Boxes in Gender/Technology Relations,” in *The Gender Technology Relation: Contemporary Theory and Research*, ed., Keith Grint and Rosalind Gill (London: Taylor & Francis, 1995): 38-39.

³ Ellen Herman, *Kinship by Design: A History of Adoption in the Modern United States* (Chicago and London, University of Chicago Press: 2008), 3.

true.”⁴ Latour argues that often more work goes into maintaining standards than on pure science. And as Bowker and Star claim, classifications and standards are idealized, never perfectly realized, and “good enough for government” is the rule, so there is a “slip between ideal standards and the contingencies of practice.”⁵

A range of science studies writers maintain that the development of standards and classification systems is not simply the gradual unfolding of consensus, instead it is a “negotiated order” and tangled web of schemes.⁶ While standards are usually introduced to resolve practical problems and ethical dilemmas, every standard and category valorizes one point of view over another, making it an ethical choice. Classifications are integral to any working infrastructure, but the decisions and negotiations that happen along the way are often lost to the historical record.⁷ They argue we need to interrogate the construction of categories and standards, as well as the conditions of production of this work because there is a great deal at stake “epistemologically, politically, and ethically” in building and maintaining standards.⁸

Science studies writers refer to a standard as a way of classifying the world. As described by Bowker and Star, a standard is a set of agreed-upon rules for the production of (textual or material) objects that span more than one community of

⁴ Geoffrey Bowker and Susan Leigh Star, *Sorting Things Out: Classification and Its Consequences* (Cambridge, Massachusetts, and London, England: The MIT Press, 1999), 49.

⁵ *Ibid.*, 15.

⁶ Bowker and Star, *Sorting Things Out*, 21; Emma Whelan, “Boundary-Work and Transgression in Patient and Expert Knowledges of Endometriosis,” (PhD diss., Carleton University, 2000).

⁷ Bowker and Star, *Sorting Things Out*, 18-19.

⁸ *Ibid.*, 10.

practice having “temporal reach” and “persists over time.”⁹ They contend that standards also have to be enforced by a legal body or professional organization and without a method of enforcement will fail. There is no “natural law that the best standard shall win” and there are many reasons why one standard does “win” out: creators build on something that is already there, use marketing, or a community of gate-keepers, or “outright conspiracy” sometimes.¹⁰

Standards are introduced to allow different communities of practice, in different social worlds, to work together and classifications, such as adoptability, served as mobile boundary objects for cooperation. Cultural studies of science writers describe translation work in science as a “cycle of feedback and reification” and suggest that reality is that which resists standardization. Yet as Star shows, the construction of standards and claims to universality always produces misfits.¹¹ Many individual exist in these “interstitial” spaces between classifications and conventions--and the spaces where they exist can be analyzed as sites of suffering, resistance, and/or change.

In the previous chapter, I described the forms of interpretation work that social workers engaged in, using their own terms of reference or meanings. The term referred to different forms of public relations work they did to educate and enlighten the public about their work in adoption. In this chapter, I connect what they *said they did*, to what they *did* by introducing the concept of translation. Translation refers to

⁹ Bowker and Star, *Sorting Things Out*, 13.

¹⁰ *Ibid.*, 14.

¹¹ Susan Leigh Star, "Power, Technology and the Phenomenology of Conventions: On Being Allergic to Onions," in *The Sociology of Monsters: Power, Technology & Domination*, ed., John Law (London & New York: Routledge), 37-39.

another kind of interpretation work or process that social workers engaged in through adoption, where the central processes are feedback and *negotiation*.

This version of translation does not simply mean that social workers use of “medico-scientific images [translates]...science directly or simply into more popular terms, nor does the process end there.”¹² Instead, it is a two-way process of translation understood as a modification process and a feedback loop. Clarke draws on Ludwig Fleck’s work to argue, “when scientific concepts and facts are (re) represented, some things are ‘lost’ while others are ‘found’ in translation,” sometimes with a new “‘vividness’ in more popular and accessible incarnations.”¹³ The popular versions “may loop back, influencing experts, among others, folding new forms into inner circles of technoscience.”¹⁴ The point of interest, according to Martin, is how “scientists and laypersons...are co-participants” in these processes. In her own work she has shown that people make meaning in their lives through the discourses of science and technology that they construct.¹⁵ Different views of the body in the population at large can have an effect back on science. For Martin and other theorists this view of translation reflects cultural developments rather than leaving an image of science where experts are separate from the rest of the world.¹⁶

¹² Adele E. Clarke, “From the Rise of Medicine to Biomedicalization,” in *Biomedicalization: Technoscience, Health, and Illness in the U.S.* ed., Adele E. Clarke, Laura Mamo, Jennifer Ruth Fosket, Jennifer R. Fishman, and Janet K. Shim (Durham and London: Duke University Press, 2011), 107.

¹³ Clarke, “From the Rise of Medicine to Biomedicalization,” 107

¹⁴ Ibid, 107.

¹⁵ Emily Martin, “Anthropology and the Cultural Study of Science.” *Science, Technology and Human Values* 23, no. 1 (Winter 1998): 36.

¹⁶ Martin, “Cultural Studies of Science,” 36

Cultural studies of science look at the “traffic” between the establishment of knowledge and cultural practices that are assumed to be “external” to knowledge (such as adoption).¹⁷ Scientific knowledge is theorized as a “cultural formation” so the focus of researchers is on resources, situations and the way scientific knowledge changes, responds to or transforms situations. The goal, says Rouse, is not to replace “internal” accounts with “social factors,” as the new privileged account, but it also rejects the epistemic authority of scientific knowledge “as is.”¹⁸ Likewise, Martin argues that the goal of analysis is not to replace science by society but to place them both inside the “invisible terrain of culture” which is overlooked by writers in ANT who describe the top-down translation activities of scientists modifying the world and bringing other on board.¹⁹

She uses Deleuze’s image of the rhizome (another gardening metaphor), described as an underground root system resembling “crabgrass” which can break apart and “grow up as a complete organism” somewhere else rather than a top-down tree system.²⁰ From this perspective we can see how sometimes objects or concepts (such as adoptability) become concrete or “autonomous” like the “immutable mobiles” described by actor network theorists.²¹ And, as Martin adds, we can follow how once produced and out in the world, these mobile objects can be used the way

¹⁷ Joseph Rouse, "What Are Cultural Studies of Scientific Knowledge," *Configurations* 1 (1992): 3.

¹⁸ Rouse, “Cultural Studies of Scientific Knowledge,” 5

¹⁹ Martin, “Cultural Studies of Science,” 30.

²⁰ *Ibid.*, 31.

²¹ Adele Clarke and Joan Fujimura. "Introduction," in *The Right Tools for the Job: At Work in the Twentieth Century Life Sciences* ed., A. Clarke and J. Fujimura (Princeton, New Jersey: Princeton University Press, 1992):13; Martin, “Cultural Studies of Science,” 32.

they were intended or not, partially taken up, or used in ways completely different from their “creator’s intentions” because of the power relations involved.²²

In chapter four I focused on the efforts of social workers to erect professional boundaries, while forcing alliances with other professions. In this chapter I draw on translation theorists who emphasize the openness of science and shift the focus to the two-way traffic “across the boundaries that are erected.”²³ Social and cultural studies of science writers have challenged the wider sense of scientific communities as closed and unengaged with social groups or practices. Whereas social constructionists focused on social interests and social interaction “that constitute shared beliefs, values, concerns of scientific communities,” cultural studies writers challenge the boundaries that supposedly divide scientific communities from others and argue the key process we should focus on is negotiation.²⁴

Defending Public Expense and Social Work Expertise

Sociologists have argued that matters of child welfare illustrate how the state governs and controls people through administrative regulation, especially marginalized populations.²⁵ But not just anyone can do this work. Two of the key players authorized to “engineer the [child welfare] regulatory system” and pursue inquiries into a mother’s fitness are social workers and mental health workers.²⁶ Yet,

²² Martin, “Cultural Studies of Science,” 32.

²³ Rouse, “Cultural Studies of Scientific Knowledge,” 13.

²⁴ Ibid., 13.

²⁵ Mosoff, “‘A Jury Dressed in Medical White and Judicial Black,’” 228; Dorothy Chunn and Shelley Gavigan, “From Welfare Fraud to Welfare as Fraud: The Criminalization of Poverty,” in *Criminalizing Women*, ed., E. C. G. Balfour (Halifax: Fernwood Publishing, 2006), 217-235.

²⁶ Mosoff, “‘A Jury Dressed in Medical White and Judicial Black’”, 228.

social workers have perennially had to justify their work and defend their expense to the public purse. One of the, frequently overlooked, areas in which they did this was adoption.²⁷

In 1950, the head of the adoption department for the CAS and Infants' Homes of Toronto said adoption was one of the most significant functions of the agency. In a report to the Board of Control, for the city of Toronto, Mary Speers thanked the council for the chance to speak about adoption and tried to garner their support for new directions planned by the agency. She provided statistics to show the growing popularity of adoption, and said the rise in the number of children placed in adoption homes, between 1946-1949, was due to skilled casework by trained social workers.²⁸ She compared the costs of keeping children in care to the savings provided by social workers in adoption departments, to underscore the undervaluing and lack of recognition given to adoption social work.

The financial details confirmed the incongruity of government funding at municipal and provincial levels, and the state's dependence on low-paid female workers:

We have never had sufficient staff in our Adoption Department to do the job that should be done. The total cost of operating our Adoption Department in 1949 was \$42,562. \$4,325 of this was paid by the City of Toronto, the balance coming from the Community Chest funds. Our awareness of the economic significance of adoption is shown in the fact that we estimate that the saving to the City of Toronto for the year 1949 alone was

²⁷ Therese Jennissen & Colleen Lundy, *One Hundred Years of Social Work: A History of the Profession in English Canada 1900-2000* (Waterloo: WLU Press, 2011). In this recent overview of social work history in English Canada, approximately two pages are given to adoption.

²⁸ Mary Speers, "Report to the Board of Control City of Toronto--by Adoption Department," (1951), 2-3 (MTA) CAS fonds 1001, Series 536.

\$120, 000 as a result of the adoption placements made that year. As most of these placements were quite young children it can be easily seen that, had they remained a municipal liability until they were self-supporting, the sum would have been staggering.²⁹

The biggest problem facing the agency was the lack of foster homes and institutions to care for children coming into care, despite what agency staff described as “a thoroughly planned program of publicity and interpretation.”³⁰ While one of the proposals was to find foster homes for children outside of Toronto, the main solution was to “step up” the adoption program. The need for care outside of kin or family structures because of poverty or family violence was not new, but now the problem was diagnosed as family dysfunction.³¹ Social workers drew on scientific research (such as attachment studies) as well as their own adoption studies, to recommend making adoption placements earlier, a goal enthusiastically endorsed by different levels of government, who could save money and operate at arms length.

Therapeutism, as a form of governance combined two powerful images: the objectivity of science with the healing power of medicine.³² As Herman observed, the management of people through “prevention, protection, instruction and help” was advanced through the actions of state officials, professionals, parents and ordinary people, and as a “non-partisan” activity it co-existed with ideological differences and debates about the size of government.³³ Maurutto, similarly argued that casework enabled the collection and “computation” of more kinds of

²⁹ Speers, “Report to the Board of Control 1951 (MTA) CAS fonds 1001.

³⁰ *Staff Circular #4*, August 1951, Children’s Aid and Infants’ Homes of Toronto) (MTA) CAS & Infants Home fonds 1404

³¹ Strong-Boag, “Children of Adversity,” 421.

³² These images are drawn from Mosoff, “A Jury Dressed in Medical White and Judicial Black,” 230.

³³ Herman, *Kinship by Design*, 12.

information and appealed to all levels of government because it “allowed the state to govern at a distance.”³⁴ Nevertheless, welfarism posed contradictions for front-line social workers, left to manage the tension where “money and care-giving” met.³⁵

Agency officials at the Toronto CAS admitted they had been hampered by internal conflicts over the past year, as a result of amalgamation and management changes, but insisted they were prepared to move forward with a “unity” of purpose.³⁶ They predicted that now every *adoptable* child could find a placement, based on the fact that in the previous year social workers completed more adoptions than ever before.³⁷

During the same year, a highly anticipated provincial report was completed providing an impetus for change.³⁸ The Minister of Public Welfare in Ontario had been spurred on by public revelations from the Director of the Child Welfare Branch that 8000 wards of the CAS were “maintained in temporary homes at public expense.”³⁹ Concern over the rising number of children coming into care prompted the Department of Welfare to conduct a study of agency services. The coordinators of the study identified three of the aims as trying to understand why more children were coming into care; to see what was in the best interests of children and “people

³⁴ Maurutto, *Governing Charities*, 132;

³⁵ Veronica Strong-Boag, *Finding Families, Finding Ourselves: English Canada Encounters Adoption from the Nineteenth Century to the 1990s* (Toronto, New York: Oxford University Press, 2006).

³⁶ *Staff Circular #4*, August 1951, Children’s Aid and Infants’ Homes of Toronto (MTA) CAS fonds.

³⁷ *Ibid.*, [emphasis added]

³⁸ *The Ministerial Report of the Committee on Child Care and Adoption Services*, Ministry of Public Welfare, Ontario 1951 (AO) RG 29 Files.

³⁹ Ministry of Public Welfare, *Report of the Committee*, (AO) RG 29 Files.

as a whole”; and to improve adoption services, particularly for older children.⁴⁰ A series of questionnaires was sent to every CAS in Ontario, followed by hearings in sections of the Province.

The department of welfare drew on provincial statistics to compare the annual cost of maintaining “hard to place” children in public institutions until the age of sixteen, versus the annual salary of one adoption social worker; “[It] is apparent...that should this worker accomplish nothing more than the placement of two such children, there would be an annual saving of \$3,500.00”⁴¹ The public expense of the social worker was weighed against the cumulative costs to the “people of Ontario” of maintaining the child in an institution. The results of the study confirmed the “financial importance of an effective adoption program” thereby, helping support the claims of social workers seeking greater recognition and funding.⁴²

The Director of one Southern Ontario CAS argued that keeping statistics, [not care-work] was essential to what social workers did because it reflected the very ideal of “scientific humanism.”⁴³ As shown, science is no one thing; practices, norms and products vary across and within disciplines and therefore it involves very different epistemic practices.⁴⁴ Economic and political considerations were integral to the science of humanism, not factors external to it, visible in the way that children

⁴⁰ Ministry of Public Welfare, *Report of the Committee*, 1 (AO) RG 29 Files.1. (AO) RG 29 Files.

⁴¹ *Ibid.*, 29. (AO) RG 29 Files.

⁴² *Ibid.*

⁴³ “Annual Report,” The Children’s Aid Society of the County of Halton, 1947. (AO) RG 29-01-525 Files.

⁴⁴ Rouse, “Cultural Studies of Scientific,” 8.

in the care of the CAS were categorized. The categories used to determine adoptability were socially produced and differed depending on the legal, administrative, clinical, and cultural “frames” used to define them and contingencies of practice. The meaning of adoptability was part of a negotiated order, or tangled web of schemes, rather than a stable object established through consensus. The significant point is that debates over definitions mattered because they affected *how* “bodies” would be “handled” and what solutions would be proposed.⁴⁵

The administrative classification of children referred to who was financially responsible for the maintenance of the child, how it would be organized, and administered. There were two main categories: *pay* or *free care*. Children in *pay care* were provided for by “municipalities of legal residence where organized” and if that was not available the province was responsible. These children were placed in: “(1) Children’s Aid Societies or receiving homes; (2) foster boarding homes; or (3) children’s institutions.”⁴⁶ Those in *free care* were paid for by the individuals or institutions involved including: “(1) free or wage homes, (2) adoption-probation homes, (3) Ontario hospitals, (4) correctional institutions; or (5) elsewhere.”⁴⁷ In 1951 there were 18,341 children in the care of the CAS in Ontario, “9,675 or 53% of these were in Pay Care and 8,666 or 47% were in Free Care.”⁴⁸

⁴⁵ Marc Berg, and AnneMarie Mol, "Differences in Medicine: An Introduction," In *Differences in Medicine: Unraveling Practices, Techniques, and Bodies* (Durham and London: Duke University Press, 1998), 2.

⁴⁶ *Report of The Committee*, Ministry of Public Welfare, Ontario (1951), 16. (AO) RG 29 Files.

⁴⁷ *Ibid.*

⁴⁸ *Ibid.*

The child's legal status referred to whether they were *permanent* or *temporary* "wards" or "*non-wards*" of the State, designating who had authority and responsibility for them. It also determined whether children were placed in pay or free care. Children were subdivided into three legal-administrative categories:

- (a) Temporary Wards – 3, 893 or 21% [87% in Pay Care]
- (b) Permanent Wards – 10, 088 or 55% [54% Pay Care; 46% Free Care]
- (c) Non-Wards -- 4, 360 or 24 %. [82% Free Care]

The most popular type of Pay Care was foster boarding homes. At the time of the report 8,913 children, or 92% of the children in Pay Care, were in foster homes, representing 49% of the total number of children. In comparison, adoption-probation homes (a form of Free Care) were used for "5, 257 children representing 29% of total children in [the] care" of CAS and "60% of the children in Free Care only."⁴⁹Of the total number of children in care, approximately 5, 257 or 30% were on adoption-probation and, of these, 64% were Non-Wards (either not yet been made wards of the agency or placed through private agencies), and 36% were Permanent Wards. Temporary Wards were not legally available for adoption and were temporarily placed in Pay Care (e.g. the CAS, foster-boarding homes or institutions).

The report placed emphasis on the fact that the majority of adoptable children were *Non-Wards* and the *infant children of unmarried parents*, where relinquishment and placement was done with the consent of the unmarried mother. These children continued to preoccupy adoption workers because "[F]or the most

⁴⁹ *Report of The Committee*, Ministry of Public Welfare, Ontario (1951), 16 (AO) RG 29 Files.

part, these infants are placed rapidly since the number of adoptive homes available for them far exceeds the number of such children available for adoption.”⁵⁰

But, as I argue, social workers used more than legal and administrative thresholds to determine a child’s adoptability. The concept of adoptability transmitted ideas about the *exchange value* of children, based on cultural ways of thinking about bodies. Social workers drew on techniques of assessment, measurement technologies, and artifacts produced by others within specific local, social and scientific contexts and extended them to the adoption context.⁵¹ As Martin has shown, ways of thinking about the body are woven through with social relations based on existing power relations. In her study of how the immune system was conceptualized, she described twentieth century developments in the “culture of health” linked to a discourse in which bodies were of two types: “those who can survive the present intensely competitive environment and those that cannot.”⁵² The difference is then presented as those with flexible, superior immune systems who can adapt to the environment versus those with inflexible systems who could not. She argues it has given rise to a “new politicization of the body” along familiar “lines of discrimination,” when we consider what groups of people are most often affected by autoimmune disorders.⁵³ Social workers helped constitute different bodies, by using psychological techniques of assessment to detect the normal

⁵⁰ Ibid., 17.

⁵¹ André Turmel, *Historical Sociology of Childhood: Developmental Thinking, Categorization and Graphic Visualization* (Cambridge University Press, 2008).

⁵² Martin, “Cultural Studies of Science,” 33.

⁵³ Ibid., 33-34.

personality and different personality types, in order to predict the child's ability to adapt in a "new" environment.

The information gathered in the provincial report relied on and integrated the working definition of "adoptability" supplied by individual Children's Aid Societies, which stated that social workers' based their definition of adoptability on:

[children's] capacity to *develop normally in a normal home environment*; and they base the acceptability of homes for adoption essentially upon those *elements which are fundamental* to such an environment....[I]n other words, they base the adoptability of homes upon the capacity of applicants for parenthood.⁵⁴

The meaning of adoptability was socially produced, meaning the definition did not emanate directly from the child (as a natural object) itself, illustrating the two-way traffic between the establishment of scientific knowledge and processes supposedly "external" to it. The concept was tailored to dominant cultural norms and culturally specific ideas about childrearing, child development, and the social conditions under which they were done. What's more, as Aitken argues, the definition of adoptability was based on a circular argument that reinforced existing social relations because self-sustaining, white and middle-class, Anglo-Saxon couples were most likely to be considered as providing the appropriate home environment because that is from where the ideal was derived.⁵⁵

The way that adoptability was defined and children categorized were singled out as areas of concern in the provincial report. Of the "18, 341 children in care on July 31st, 1951, 7,230, or 40%, were classified as 'adoptable' and legally available

⁵⁴ *Report of The Committee*, Public Welfare, 17.

⁵⁵ Aitken, "Critical Compromises," 274-299.

for adoption,” whereas “11,111, or 60%, were classified as ‘non-adoptable.’”⁵⁶

These divisions reflected their position in Pay and Free Care. Out of the 11, 111 “non-adoptable” children 7,986, or 72%, were in Pay Care, representing significant financial cost to municipalities and the Province, compared to 3,125, or 28%, who were in Free Care.

Government officials divided completed adoptions into two categories—agency and private adoptions—both of which had to receive final approval by the CAS in Ontario. Agency adoptions referred to children “placed by Societies in adoption-probation homes,” and “private adoptions” referred to children placed by “individuals or organizations other than Children’s Aid Societies.”⁵⁷ Although some private adoptions came about through divorce or remarriage, the majority came from the children of unmarried mothers. The majority of completed adoptions were CAS adoptions; “1,898 or 67% were Children’s Aid Society Adoptions and 921 or 33% were private adoptions...approved by the Societies,” and the majority, or approximately 80-84% of private and agency adoptions, were placed in Protestant homes.⁵⁸ Social workers recorded “religion” as a key reason why a child remained “non-adoptable,” particularly for children in Pay-Care. Still, sometimes they could not find a home for children already assessed as adoptable and legally free, because of a “serious shortage of applicants for Roman Catholic children of any age,” showing why *adoptability* was a complex rather than a stable object.⁵⁹

⁵⁶ *Report of The Committee*, Public Welfare, 17.

⁵⁷ *Report of The Committee*, Public Welfare, 25.

⁵⁸ *Ibid.*, 18-19.

⁵⁹ *Ibid.*

The number of recorded applications, placements, and completed adoptions provided a snapshot of the adoption landscape: 1,903 were accepted, 1,817 adoption-probation placements were made, 1,898 CAS adoptions completed, and, while there were still 1,689 “adoptable” children not yet placed “for them there is at least hope.” The more worrisome picture, according to government officials, was the 11, 111 of children in the care of 53 Societies described as “non-adoptable:”

It is true that of this number, 30% were temporary wards, many of whom will undoubtedly return to their own homes when “neglect” and “dependent” conditions have been relieved and another 8% may become “adoptable” when legal difficulties are removed. Still others, however will remaining “long-time temporary care” and pass “the easily adoptable age”, thus their chances for placement even after legal obstacles are removed would appear to be minimal on the basis of the present pattern in adoption placements.⁶⁰

The report was critical of the wide variation in CAS adoption practices within and between agencies, and recommended that agencies exercise greater *flexibility* in determining a “suitable home” or “suitable child” for adoption. The legal, social, and clinical reasons recorded for a child’s non-adoptability are shown in Table 5.1.

Table 5.1 Reasons for Non-Adoptability of Children in Ontario CAS

REASON	No. Children	Per cent
(a) Legal Reasons	4, 242	38
(b) Over “the easily adoptable age”	2,293	21
(c) Mental, physical, other health and behaviour difficulties	2,752	25
(d) Other reasons	1,824	16
TOTALS	11,111	100

Source: Department of Public Welfare, *Report of the Committee on Childcare and Adoption Services*, 1951

⁶⁰ *Report of The Committee*, Public Welfare, 21.

Part of the background context to the report was the ongoing debate about different levels of government funding for welfare services, and lack thereof. There were internal disputes within the CAS about whether more provincial funding for childcare services was a good thing. Some social workers and CAS leaders worried that increased provincial involvement (especially funding) would threaten their professional autonomy. Immediately after the Second World War, one Society president declared that greater government funding was a threat to democracy, which he called a “system of *individual* responsibility.”⁶¹ He warned that centralized authority and the “enforced equitable distribution of wealth” is what led to fascist dictatorships in Europe and Russia.⁶² While he may have represented the extreme end, concerns about social work’s autonomy were not without merit. Provincial officials increasingly introduced legislative changes without input from the (mainly female) social workers and their professional associations.⁶³ Nonetheless, the leadership of the OACAS continued to press the government for more funding, particularly for older children and others who were part of the 10,000 permanent wards needing stable homes.

In 1954, the organizing theme for the annual conference of the OACAS was the link between family, nation, and citizenship, with a special focus on the question of adoption versus institutionalization. Social workers within the association cited research from the medical journal, *The Lancet*, by a doctor who argued that

⁶¹ “The President’s Remarks,” Kent County Children’s Aid Society, May 1948. (AO) OACAS fonds F819 MU5088. [emphasis added]

⁶² Ibid.

⁶³ Aitken. “Critical Compromises,” 1987.

communal living was not as good as an individual home. While they claimed this as the ideal, they had to reconcile it with the fact that social workers still considered many children unadoptable because they were “handicapped” by “race,” medical conditions, religion, and “mental defects.”⁶⁴ Social work leaders at the Toronto CAS had long identified obstacles they faced in adoption. One of the key problems was the shortage of qualified staff, a symptom of inadequate funding. It meant that agencies could not do adequate follow-up, despite the sensitive nature of the work involved, and compounded criticism from parents on long waiting lists, or who had been rejected.

One adoption leader told the Board of Directors for the Toronto CAS that interpretation work with the public would go a long way, especially if they could communicate the reason for delays to couples.⁶⁵ Speers, as head of the adoption department, appealed directly to the municipal Board of Directors, asking them to support the profession. She argued that specialized skills were needed to assess homes for children, but it was difficult or not always possible to relay this to the public. She described one case in which the doctor, social worker, and husband involved had been alerted to the wife’s heart condition but they withheld medical information “for her protection,” making it hard to explain why the couple was rejected for adoption. Parents tended to criticize social workers decisions because

⁶⁴ OACAS Files, 1954-1960 (AO) RG 29-01-516.

⁶⁵ Mary Speers, “Report to the Board,” (January, 1950),1-6; “Report for Board Meeting, Oct. 25, 1950,” Submitted by Mary Speers; “Adoption Department Comments on Survey Report” by Mrs. Harris 1949; “Report On Work of The Adoption Department Presented to the Board of Directors, October 13th, 1955;” (MTA) Box 76 File #2. The report described limitations still faced by the CAS Adoption Department despite passing three resolutions at the beginning of the year in January, resulting in more placements midway through 1950 than in the entire year of 1949 (or previous 12 months). These three resolutions are spelled out in the 1955 report described above.

they appeared arbitrary and unaccountable.⁶⁶ Despite claims from parents who were rejected, adoption scholars agree that social workers still tended to focus on "meeting the needs of prospective adoptive parents."⁶⁷

Both the OACAS report and the Deputy Minister's report on adoption concurred that security would be enhanced if the CAS could obtain guardianship immediately, by severing ties with the "birth" mother so social workers could act on behalf of the child. Part of the social work association's rationale was that the attaining permanent wardship would eliminate the need to contact birth parents later on if there were concerns about placement, or "uncertainty about the [adoptive] parents' full realization of the meaning of adoption."⁶⁸ They argued, "[G]reater protection for child and parents would be ensured."⁶⁹ Social workers argued that practical and legal headaches could be avoided if they were given legal authority for children sooner; in so doing, they expanded their authority over the medical and developmental supervision of children.

Standardization and Naturalization

One of the processes associated with scientific adoption practice was standardization, and it was tied to the strategy of professionalization. Social work's struggle for greater professional credibility shaped the content and development of early adoption standards. As one social worker admitted, in the early 1950s,

⁶⁶ Sidney Katz, "Why Can't You Adopt a Child," *Chatelaine* (September 26, 1957): 13.

⁶⁷ Aitken, "Critical Compromises," 276; Strong-Boag, *Finding Families*; Herman, *Kinship by Design*.

⁶⁸ OACAS, 'Report' 1952:3 (AO) OACAS fonds F819.

⁶⁹ *Ibid.*

adoptive workers tended to be overly cautious in the beginning, being quick to label “doubtful cases” because most social workers lacked “professional confidence” and suffered “professional insecurity.”⁷⁰ She told an audience of social workers, attending an adoption institute, that the “desire to gain some degree of public recognition” led to the creation of standards that differed quite “sharply” from the “black market,” which had gained notoriety in Nova Scotia and other provinces.⁷¹

According to Herman, the earliest set of standards in adoption was the *matching* paradigm, based on physical resemblance and ideas about “sameness” (such as religion, religion, skills/interests, ethnicity).⁷² Matching was supposed to ensure bonding and reduce the uncertainties associated with bringing a “stranger” into the family permanently in adoption. Yet, managing fear about the backgrounds or hidden natures of children who were biological strangers became more of a challenge in adoption. The constructions of risk multiplied as social workers forged alliances with knowledge-based professions, and placed themselves at the center of an adoption network.

Many adopting parents still avoided public agency adoptions, either because they wanted to exercise discretion over the kind of child they adopted, or they

⁷⁰ Frances MacKinnon, “Adoption of Children With Handicaps,” 1954:16-25 (MTA) CAS fonds 1001 Series 540.

⁷¹ MacKinnon, “Adoption of Children With Handicaps,” 16-25 (MTA) CAS fonds 1001 Series 540. She would have been aware of the scandal surrounding the Ideal Maternity Home, an hour’s drive from Halifax, in Chester, Nova Scotia. For more on this case see Bette Cahill, *The Butterbox Babies: New Revelations 15 Years Later* (Halifax: Fernwood Publishing, 2006 [1992]); Karen A. Balcom, *The Traffic in Babies: Cross-Border Adoption and Baby-Selling between the United States and Canada, 1930-1972* (Toronto Buffalo London: University of Toronto Press, 2011).

⁷² Herman, *Kinship by Design*; Patti Phillips, “Blood Not Thicker Than Water: Adoption and Nation-Building in the Post-War Baby Boom,” (master’s thesis, Queen's University, 1995).

resented the long waiting periods and increased scrutiny of themselves.⁷³ Other parents approached doctors and other private brokers to arrange adoptions, because they feared rejection from public agencies. While there was a surplus of Catholic Children in the CAS, Jewish children were as hard to come by as Catholic adoptive parents. According to Herman, one U.S. estimate put the ratio of Jewish applicants to infants, after 1940, at 25:1.⁷⁴ Many couples either considered non-Jewish children and/or went abroad, to places that included Canada. Herman found that private agencies were more flexible when it came to religious qualifications, which was one of the arguments used by public agencies to defend their own practices. At the time adoption law treated religion as a “birthright” and matching practices did not only entail children looking like parents but “being” like them--in spiritual substance.⁷⁵ Nevertheless, in Ontario, the Protestant CAS was continually scrutinized and criticized by Catholic authorities for being more flexible in practice and placing Catholic children in Protestant homes.

One example that served as a catalyst for debate about the merits of public versus private adoption appeared as a scandal on the front page of the *Toronto Star* in 1953.⁷⁶ A couple from Brooklyn was accused of baby trafficking, along with a Toronto doctor, after being stopped at the Canadian border. Mrs. Shinder, a Russian-Jewish immigrant, did not have proof of her American citizenship. The police

⁷³ Herman, *Kinship by Design*, 139-140; Shurlee Swain, "Market Forces: Defining the Adoptable Child, 1860-1940," *Social Policy & Society* 11, no. 3 (2012): 15.

⁷⁴ Herman, *Kinship by Design*, 124-25.

⁷⁵ *Ibid.*, 125.

⁷⁶ 'Historical Documents' (Newspaper clippings) Deputy Minister's Files reference to case; *Toronto Star*, February 28, 1953 (AO) RG 29-01-491.

morality squad, working with the RCMP and the FBI, claimed to have uncovered a baby-smuggling ring that took up to 100 babies across the U.S. border over the previous year.⁷⁷ In the early arrests, police argued “black markets” made it difficult for anyone to get a baby because healthy [white] infants fetched such a high price in the United States.⁷⁸

Over the days and weeks that followed it became clear that the Shinders were merely proceeding as many other couples had done in pursuing a private adoption. Previous arrangements had been made, with the Toronto doctor serving as an intermediary between the baby’s mother and the couple. Introduced by mutual friends, the doctor had conducted his own home-visit to inspect their “very ordinary” three-room Brooklyn apartment and found it to be a very nice place.⁷⁹ The couple explained that the reason they had avoided a public agency adoption was because friends had told them they would be rejected because of their financial and Jewish status. They could not afford the \$500 fee that American agencies charged and very few Jewish babies were available at a time when agencies were committed to religious matching.⁸⁰

Even though it was confirmed that the “natural” mother had consented to the adoption, social workers at the CAS objected to the placement because it defied

⁷⁷ *Montreal Herald*, February 15, 1952. “Police say the ring sold hundreds of babies to wealth couples at prices ranging between \$3000 and \$4000” (see \$1 Million Baby Farm Ring Broken”, “Alleged Child of ‘Baby Ring’ surrenders,” *Montreal Gazette* (February 6, 1952)). The anti-Semitism reported in the Shinder case appeared to be connected to other arrests in Montreal. In 1952, a front-page story reported that a group of established Montreal doctors and lawyers had placed 400 babies with Jewish parents, mostly in the United States, even though only four Jewish “girls” had reported ‘illegitimate’ births during the same year.

⁷⁸ *Montreal Gazette*, February 6, 1952

⁷⁹ Sangster, “Should Edith Shinder Get Her Baby?” *Maclean’s* (June 1953).

⁸⁰ Sangster, “Should Edith Shinder Get Her Baby?” *Maclean’s*, 23.

every tenet of scientific adoption practice.⁸¹ They criticized the case because the natural mother was still concerned with the baby's welfare, the infant's physical and mental development had not been evaluated, a home-visit had not been conducted, and the one-year residency (required by the province) was not possible. Furthermore, social workers said the CAS had not established whether the Shinders were *fit* parents and whether a proper match had been made.⁸² Collectively, they provided their own interpretations of the problem of private adoption by advising parents not to treat the selection of a child as a consumer product and trying to convince parents that the private market was more dangerous than going through public agencies where standards of practice were based on up-to-date scientific knowledge. Yet, even textbook "scientific" adoptions broke down.⁸³

[Mrs. W] said, "What's bred in the bone comes out in the marrow"⁸⁴

One particular adoption case, marked as "controversial" in government records, eventually reached as high as the Premier's office.⁸⁵ In 1952 the Director of Child Welfare in Ontario received a hand-written letter from an adoptive mother (Mrs. Y) "at the end of her rope." In her letter, she briefly described the events of the past five years. In 1947, a baby girl was born and put into the care of the CAS in

⁸¹ Throughout this thesis where the terms natural, birth, unmarried, or unwed mother or "girls" are used I retain the original in order to convey the language of the period. Contemporary readers may assume scare quotes are intended and that I remain conscious of the difficulty of terminology.

⁸² As one of a number of controversial cases, the Shinder case may have prompted revisions to the *Child Welfare Act* of 1955, which consolidated changes in the dominant discourse towards children's rights and protection.

⁸³ "Contentious Issues," Adoption Subject Files (AO) RG 29-01.

⁸⁴ Winterson, "Why Be Happy," 83. Mrs. W, Winterson's adoptive mother, expressed a common cultural bias through this popular axiom.

⁸⁵ Lily is a pseudonym, as is the reference to her mother, Mrs. Y.

Southern Ontario where was quickly placed with Mrs. Y as her foster mother. She and her family expressed interest in adopting the infant and six months later they were told the baby was available for adoption and they were, she wrote, “given permission” to apply. In regard to background information, she said, “We were told her mother was an average person but very little or nothing about the father. We were under the impression this child came from a *good background*.”⁸⁶

Near the end of the two-year probationary period, the family applied for and received the final adoption papers, but soon after the mother was told the child was “mentally deficient.” The couple had taken the child to the outdoor department of her local general hospital, where the doctor found the child in “perfect [physical] condition;” however, he asked the adoptive mother to take her daughter to the mental health clinic in the same city. The second doctor was of the opinion that “[S]he will never be able to attend our public school and only to auxiliary classes after she reaches the age of 7 or 8 years, from there to handicraft school if she shows enough progress.”⁸⁷ Both doctors asked Mrs. Y. if the child had ever been physically and mentally examined, and she replied no, explaining the child had been in her care since she was two weeks old. She wrote an appeal to the Minister:

[T]hese *Doctors* feel the Children's Aid have made a big mistake letting this child go for adoption in this condition without examination...I feel this child in her mental condition would be a *menace* to my family of three boys and my home in general.⁸⁸

⁸⁶ “Contentious Issues,” Adoption Subject Files (AO) RG 29-01 [emphasis added].

⁸⁷ Ibid.

⁸⁸ Ibid.

She had already approached the two CAS social workers responsible for the adoption, to ask for their assistance, and was told there was nothing they could do because the adoption had already been legally finalized.

The circulation of rumours played a role in reigniting cultural fears about stranger adoptions and the inheritance of *bad blood*, galvanizing efforts to have the adoption reversed. The adoptive mother confessed to hearing information that only added further “insult to injury,” finding out from someone working at the nearby sanitorium that the infant girl's mother was “not of a very good background.”⁸⁹ In a letter co-signed by her husband, they asked the Minister to examine the hospital reports, and then send them an official response. Private records obtained by the CAS indicated that the mother had been admitted to the sanitorium for TB, not feeble-mindedness as feared, a common practice at the time, but the negative association of confinement with mental defectiveness had already been made. The parents had the child tested and retested, until finally the mental hygiene experts involved believed the child would be at risk if she remained in the home, because she faced extreme rejection by the parents and teasing by the girl’s non-biological siblings (the couples’ biological children).

Collectively, the experts involved described Lily as a pretty, silly, active, talkative blond-haired girl who would never be a genius. At the same time, the physicians and mental health experts shared the sense that the child had been unfairly marked as a problem. The medical experts, presuming that women were responsible for nurturing, stated they believed the mother was blaming her own

⁸⁹ “Contentious Issues,” Adoption Subject Files (AO) RG 29-01.

inadequacies and social embarrassment on the child's heredity, something that became a recurrent theme in adoption.⁹⁰ The adoptive parents pressured the CAS, their local MP and the Minister of Welfare to overturn the adoption, using the support of their lawyer. While the CAS remained steadfastly opposed because the adoption had been legally finalized, eventually, the Minister's office revoked the adoption and placed the child back with the agency.

The case stands out as an early example of a wrongful adoption case and illustrates the difficulties of standardizing adoption. The pervasiveness of psychology and psychiatric discourse is demonstrated by the fact that adoptability gradually expanded to include the parents "feelings for" and "comfort" with the child, a highly contentious and subjective variable. As a lens through which to assess the goals of scientific adoption, there are at least three ways to read this story.

Herman provides two possible interpretations for this story and stories like it. In the first, adoption rationalization, associated with Weber's analysis of modern bureaucracies, is described as an example of "modern social engineering, at once arrogant and utopian" where attempts at "mastery and prediction" defined the goals of those in "social welfare, human science, and public policy."⁹¹ From this perspective, social workers' efforts were only partially successful because it was difficult to agree on common standards, what would be measured and how. Even

⁹⁰ Child Welfare Branch, "Ad Hoc Committee on the Retention of Adoption Records." Director's Files 1976-1978 (AO) RG 29-107. In a report, the ad hoc committee stated that the majority of requests for information came from adoptive parents, unwilling to admit a child's behavioural problems are their fault.

⁹¹ Ellen Herman, "The Paradoxical Rationalization of Modern Adoption," *Journal of Social History* 36, no.2 (2002): 339-385.

when rationalization is measured “practically,” through the study of adoption outcomes arranged by experts and their growing professional authority, she concedes there was only limited success.⁹²

But if instead we treat “adoption rationalization” as a “moral ideal,” described as the power of the state to intervene in private life, shifting some power “away from parents,” then, following Herman’s second line of analysis, social workers were successful.⁹³ The line between the public and private spheres was being redrawn through adoption, as professional social workers were granted greater authority by the state to determine the shape of families, and who “belonged” together.⁹⁴ It became *natural* to form kinship between strangers (the formation of heterosexual families through adoption), so modern adoption was, as Herman says, a “social revolution.”⁹⁵

I suggest a third way to read the story sees it as part of an ethical shift, whereby health (and medicine) became a cultural good. As an early example of “wrongful adoption,” Lily’s story had implications that exceeded whether the formation of adoptive families was considered successful or natural. Changes to adoption practice and social work went beyond the governance and regulation of adoptive families to affect all families. Scientific adoption--kinship by design--was one more pillar in a new regulatory regime known as *healthism*, which aimed to

⁹² Herman refers to Max Weber’s meaning of *rationalization* in Herman, “The Paradoxical Rationalization,” 341.

⁹³ *Ibid.*, 341-343.

⁹⁴ Patti Phillips, ““Financially irresponsible and obviously neurotic need not apply”: Social Work, Parental Fitness, and the Production of Adoptive Families in Ontario, 1940-1965,” *Histoire sociale/Social History* 39, no.78 (2006): 329-358.

⁹⁵ Herman, “The Paradoxical Rationalization,” 339-385.

improve the health and composition of all families through the practical application of new forms of knowledge.⁹⁶ Lily's case serves as a harbinger of that change.

In order to understand and explain this cultural shift, Clarke introduced the concept of healthscapes to “capture the temporality and ethicality” of, what Foucault called, “regimes of practices” and, what Collier and Lakoff called, “regimes of living,” which “posit ethics of how life is to be lived.”⁹⁷ She showed that previously, the eighteenth and nineteenth centuries, “humanitarian narratives” in popular culture “helped to establish humanitarianism as a cultural good. Her construction of a history and typology of “healthscapes/regimes/practices” showed that a shift occurred between 1945 and 1970, which “helped to establish the rise of medicine, medicalization, and biomedicalization as cultural goods.”⁹⁸ Ladd-Taylor and other scholars have similarly shown that a voluntary ethos and moral economy of health was emerging, as it became one's moral responsibility and national duty to *be healthy*.⁹⁹ Evelyn Fox-Keller describes a critical change, related to the shifting nature-nurture debates of the 1950s and 60s, as a result of research on theories of

⁹⁶ Georgina Feldberg, Molly Ladd-Taylor, Alison Li, and Kathryn McPherson “Introduction,” in *Women, Health and Nation: Canada and the United States since 1945*, eds. Georgina Feldberg, Molly Ladd-Taylor, Alison Li, and Kathryn McPherson (Montreal & Kingston, London, Ithica: McGill-Queen's University Press, 2003), 21-23.

⁹⁷ Clarke, “From the Rise of Medicine to Biomedicalization,” 106

⁹⁸ Ibid.

⁹⁹ Molly Ladd-Taylor, “A Kind of Genetic Social Work’: Sheldon Reed and the Origins of Genetic Counselling,” in *Women, Health and Nation: Canada and the United States since 1945*, eds. Georgina Feldberg, Molly Ladd-Taylor, Alison Li, and Kathryn McPherson (Montreal & Kingston, London, Ithica: McGill-Queen's University Press, 2003), 67-83.

constitutional disease and the concept of “disease genes:” the parental *right* to expect a healthy child.¹⁰⁰

Susan Lindee argues that the labor of many different kinds of actors contributed to these medical and social trends. She showed how groups, often at odds with each other, converged around the science of reproduction and abortion (e.g. progressive pro-choice discourse and new forms of reproductive regulation).¹⁰¹ Stronger ties were formed between business, science, and medicine, and made practical by philanthropic and social welfare institutions.¹⁰² Up until now, the labor of social workers in transforming the discourse about nature-nurture, what Fox-Keller calls the “transfiguration of genetics,” has been largely invisible, while the labor of scientist and medical “managers” has been kept in view.¹⁰³ Social workers engaged in the practical work of heredity, providing a means and their own translations of the science of heredity in adoption.

Translation and The Practical Work of Heredity

Miller defines the “practical work of heredity” as services that included genetic and medical counseling, prediction of risk, and prenatal diagnosis, all of which operated through the use of measurement technologies. Ladd-Taylor describes

¹⁰⁰ Evelyn Fox-Keller, “Nature, Nurture, and the Human Genome Project,” In *The Code of Codes: Scientific and Social Issues in The Human Genome Project*, ed., Daniel J. Kevles and Leroy Hood (Cambridge, MA & London: Harvard University Press, 1992), 281-299; Susan Lindee “Genetic Disease in the 1960s: A Structural Revolution,” *American Journal of Medical Genetics* 115 (2002): 75-82.

¹⁰¹ Lindee, “Genetic Disease in the 1960s,” 75-82.

¹⁰² Lily Kay, *The Molecular Vision of Life, The Molecular Vision of Life: Caltech, the Rockefeller Foundation and the Rise of the New Biology* (New York: Oxford University Press, 1993).

¹⁰³ Fox-Keller, “Nature, Nurture,” 281-299.

the corresponding influence of psychology in medicine, a change in orientation also present in social welfare work, what she calls a “kind of genetic social work.”¹⁰⁴ As scholars direct greater attention to the “nurture” side of the equation, they have begun to rethink the boundary between the growth of sciences in psychology, psychiatry and psychoanalysis, and its separation from the “old order” eugenics, dismissed as “pseudo-science,” and the new science of genetics.¹⁰⁵ Many of the same professionals were involved in both eras, the science of eugenics between 1890-1945, and the rise of medical genetics from 1940 onward.¹⁰⁶ Many of them shared the language of prediction and prevention, and wanted to regulate heredity and reproduction; however, after 1945 emphasis was placed on “positive” eugenic strategies (e.g. prevention) over negative ones (e.g. sterilization).

Rather than one form of knowledge (nurture) displacing another (nature), an interest in the interaction between them, or *interactionism*, continued to shape the activities of the human, social and medical sciences after WWII. There was already a well-known “critique” of “mainline eugenics;” in the human sciences heredity was no longer seen as “entirely antagonistic to environment,” the new paradigm understood “heredity and environment...as mutually interactive.”¹⁰⁷ Fiona Miller’s work on the development of medical genetics in Canada demonstrates that

¹⁰⁴ Ladd-Taylor, "A Kind of Genetic Social Work," 67-83.

¹⁰⁵ Ladd-Taylor, "A Kind of Genetic Social Work," 67-83; Michael A. Rembis, "(Re)Defining Disability in the 'Genetic' Age: Behavioral Genetics, 'New' Eugenics and the Future of Impairment," *Disability and Society* 24, no. 5 (August 2009): 586-94; Allison C. Carey, "Beyond the Medical Model: A Reconsideration of 'Feeble-mindedness', Citizenship, and Eugenic Restrictions," *Disability and Society* 18, no. 4 (2003): 411-13.

¹⁰⁶ Diane Paul, *The Politics of Heredity*; Clarke, "From the Rise of Medicine to Biomedicalization," 95.

¹⁰⁷ Fiona Miller, *A "blueprint" for defining health: making medical genetics in Canada, 1935-1975* (PhD Diss York University, 2000), 17.

interactionism was the guiding scientific paradigm after WWII and this study of adoption supports that view. Kay described the related interdisciplinary ethos that shaped biology and other research communities after WWII, all of whom wanted to shape human behavior and help individuals adjust to their changing environment.¹⁰⁸ An example was the public attention given to the “quintessential... collaborative project” in Ontario, the Dionne Quintuplets, also used to launch the first adoption campaign.¹⁰⁹ Miller argues that, within this interdisciplinary context, two powerful narratives operated: “the increasing burden of genetic disease,” and the “possibility” for practical intervention by professionals.¹¹⁰ Medical geneticists built on these narratives and developed professional organizations to “coordinate themselves as the leaders of a new and expansive domain of clinical practice—genetic service.”¹¹¹ But they did not operate alone. Social workers also engaged in enrolling researchers and doctors.

In a 1947 article written for the Community Chest of Greater Toronto, social workers at the CAS of Toronto described a growing number of adoptions due to the scientific placement practices of the Adoption Department. They boasted that over the previous year ten workers had placed 372 babies and 553 were on adoption probation during the same period. They attributed the increase to the integration of new scientific knowledge in practice:

¹⁰⁸ Kay, *The Molecular Vision of Life*.

¹⁰⁹ Miller, *A “blueprint” for defining health*, 20; Dehli, “Fictions of the Scientific Imagination,” 17. See chapter three in the dissertation for a discussion of the adoption campaign.

¹¹⁰ Miller, *A “blueprint” for defining health*: 40.

¹¹¹ Miller, *A “blueprint” for defining health*: 40; Ladd-Taylor, “A Kind of Genetic Social Work,” 67-83.

‘Tremendous strides are being made in the field of human heredity’, explained Dr. Norma Ford Walker, professor of human biology at the University of Toronto, who serves as a consultant to the Children’s Aid Society. By careful study of each child it is possible to discover its probable inheritance in the light of recent researches. The result is frequently that ungrounded fears are dispelled and more babies can be placed for adoption.¹¹²

In the 1940s and 50s, Dr. Ford Walker worked together with researchers in many disciplines, ranging from “physical anthropology through dentistry,” building on the tradition of medical genetics while working with other social institutions. Her research is relevant to the dissertation because it illustrates how adoption practice came to incorporate science-based methods and findings, and how adoption provided practical and social relevance for medical genetics. As a consultant to the Children’s Aid Society Adoption Department, Ford Walker developed an “Indigenous Tradition” which proved useful to social workers:

[R]ather than specific genes causing [a] specific disease, the indigenous tradition emphasized hereditary factors and developmental processes. Applied to medical systems, with the aid of constitutional medicine, this etiological approach produced pre-dispositions and constitutional types.¹¹³

As a “formal system of thought,” the Indigenous tradition contributed to practices that opened “particular bodies” up to “investigation,” including children in the care of the CAS.¹¹⁴ Miller argued that the pediatric hospital was at the center of investigations. She showed how the tendency for “congenital and genetic disease”

¹¹² “Community Chest of Greater Toronto,” (July 1947): 1 (MTA) Infants Homes of Toronto fonds 1404.

¹¹³ Miller, *A “blueprint” for defining health*, 19.

¹¹⁴ *Ibid.*, 20. Miller’s research did not include adopted children.

categories to be blurred proved beneficial to genetic counselors, because the influence of genetics was unknowable.¹¹⁵ Social workers exploited the same gap.

Walker emphasized research in its “service role towards medicine” which was developed through links with the Hospital for Sick Children and “other clinical facilities beginning in the late 1930s.”¹¹⁶ Genetic expertise gained wider relevance through its convergence with the goals of social institutions and agencies affiliated with the Hospital for Sick Children, such as the Children’s Aid Societies of Ontario.¹¹⁷ Miller described the significance of “twin” and “mongol” studies conducted by Ford Walker and her students, as two methods for gathering and measuring data on heredity, though makes no mention of adoption studies.¹¹⁸

Popular magazines and CAS records did, however, emphasize Walker’s service role as an adoption consultant. Writers extolled the virtues of interdisciplinary collaboration and the circulation of information because it provided more certainty in adoption:

Pediatricians and the Toronto Hospital for Sick Children supply detailed reports on the baby’s physical needs. Social workers and psychologists work together to establish the intellectual and emotional needs of the baby. In cases where it is necessary, the society draws on the expert advice of the psychiatrists of the National Committee for Mental

¹¹⁵ Ibidl, 39. Miller explains that “congenital” meant “present at birth” but was not synonymous with genetic as clarified in a 1970 textbook *Medical Genetics* by Victor McKusick, though she says the two terms were also frequently confused by physicians.

¹¹⁶ Miller, *A “blueprint” for defining health*, 18-19.

¹¹⁷ Speeches, conference proceedings, and records such as the staff bulletin of the CAS reported on meetings between members from HSC and CAS. (MTA) CAS and Infants’ Homes fonds 1404

¹¹⁸ Adoption studies were (and are) frequently compared with twin studies because the two populations are believed to represent “pure” samples of “nature-nurture” studies.

Health...Dr. Norma Ford Walker, an outstanding authority on heredity, gives voluntarily her advice on problems of heredity.¹¹⁹

Social workers were encouraged to keep up with current developments in many fields in order to make better adoption placements, a role that was formally identified in a Report by Adoption Committee of the OACAS, in 1951, as they began a systematic study of adoption standards. The social worker had a particular responsibility to acquaint “himself [sic] with specialists in the area of medicine, psychiatry, psychology, [and] genetics.”¹²⁰

Further evidence of interdisciplinary collaboration between experts appears in the records of Adoption Institutes, as well as national and international conferences on adoption and social work.¹²¹ Nevertheless, the precariousness of social workers’ professional status remained a constant theme during the 1950s.¹²² In May 1951, members of the Canadian Welfare Council and the Toronto CAS attended the North American “Conference on Adoption Procedures and Practices” held in New York City under the auspices of The Child Welfare League of America (CWLA). Later the same week, they attended the National Conference on Social Work in Atlanta. Before the Adoption conference began, questionnaires were

¹¹⁹ Anne Fromer “Adoption Don’ts,” *Star Weekly*, May 7, 1949:8 quoted in: V. Strong-Boag “Disability and Child Welfare” 2007. See within the dissertation the annual reports of the CAS and staff bulletins for evidence of collaboration between the CAS and Dr. Ford Walker.

¹²⁰ OACAS, 'Report of the Committee On Child Care And Adoption' 1952:3 (AO) OACAS fonds F819.

¹²¹ In May 1951, members from the Canadian Welfare Council and the Toronto CAS attended the ‘Conference on Adoption Procedures and Practices held in New York city under the auspices of The Child Welfare League of America, May 1951, and attended the National Conference on Social work later that week in Atlanta. Conference on Adoption Procedures and Practices (held under the auspices of) THE CHILD WELFARE LEAGUE OF AMERICA (May 10-12, 1951)(Box 76, #2-CAS fonds 1001) National Conference of Social Work at Atlantic City (May 13-18) 1951—Notes (from Mary E. Fairweather, Supervisor of Adoption, Children’s Services Cleveland (Box 76, #2)

¹²² OACAS “A Study of the Disposition of Wards’ 1959:1-27. (AO) RG 29-01-501.

distributed and returned by 96 of the delegates. Eight different committees were struck to summarize the results of the survey, “make recommendations for the conference,” and prepare workshops. The CWLA wanted to assess the validity of current procedures and highlight areas for further study. Their findings were shared with welfare workers from both countries, to further the goal of standardizing agency practices and establishing jurisdiction.

At the Toronto CAS, nurses and psychologists were on staff and regularly involved in the health care and planning for children waiting to be released or placed in temporary boarding homes.¹²³ However, social workers continued to stress that they still had the final say and responsibility for determining a child’s adoptability. Although they drew on the expertise of clinicians and other professionals (e.g. nurses, doctors, psychologists, psychiatrists, geneticists), the latter were only supposed to act as consultants. The CAS emphasized the fact that the psychiatrist was equally dependent on the skills of the trained social worker. Children remained politically mute in the process but were often ascribed a great deal of agency by the social worker. The success or failure of the adoption was attributed to actions initiated from deep *within* the child:

Some children committed to our permanent care are *not ready or able to accept* substitute parents. They have been so deprived of the stability and affection they needed, that they are *no longer able to trust themselves* to give their love freely even to kindly adopting parents. Their relationships are superficial and they can no longer let

¹²³ E. Sellery, Supervisor, “Report to Board of Directors on Infants’ Health Services,” 1955 (MTA) CAS fonds 1001 Series 531, Toronto Directors’ Reports.

any one get close to them. This is one of the areas in Adoption work where the diagnosis of a psychiatrist is most helpful.¹²⁴

Speers argued that this was a two-way process, where each depended on the other, because only “pertinent” information provided by the caseworker could enable the “diagnosis of a psychiatrist.” In turn, the social worker accepted the assumptions of, psychiatry,

[A] Consultant Psychiatrist can hardly be expected to give us constructive help unless the case worker has supplied him with enough pertinent information about the child, his development and personality, his way of dealing with traumatic experiences and his relationship with parent persons and siblings.¹²⁵

Likewise, adoption educator Mary Fairweather told social workers not to ask doctors if *any given child* is adoptable, nor to ask “doctors *what is* adoptable” because there was no unanimity amongst doctors on the question of adoptability.¹²⁶

At the second of two round-tables on the topic, “The Child for Adoption,” Fairweather asked social workers to discuss: what in a child’s background would prevent them (as practitioners) from recommending adoption? She acknowledged that even amongst a small group of social workers there was “wide space for difference of opinion on this subject.”¹²⁷ What, she asked, did social workers do with “background” information in their own practice, when the child was otherwise

¹²⁴ Mary Speers, “Speech to Protestant Children’s Homes on Adoptions Practices,” (1951); Mary Speers “Adoption Practices in the Children’s Aid and Infants’ Homes of Toronto,” A Speech to the Department of Psychological Medicine, H.S.C. (November 1951) (MTA) CAS fonds 1001-Series 540.

¹²⁵ Mary Speers, “The Relationship of the Psychiatrists to Adoption Procedure,” Speech Presented by Mary Speers to the Department of Psychological Medicine, HSC (November 1950): 3 (MTA) CAS fonds 1001 Series 540.

¹²⁶ Kirkpatrick and Fairweather, “The Child for Adoption,” (Session II) *Adoption Institute*, (1952): 25 (MTA) CAS fonds 1001 Series 540. See for example: H.S. Lippman, “Suitability of the Child for Adoption,” *American Journal of Orthopsychiatry*, 270 (1937): 270-273.

¹²⁷ Kirkpatrick and Fairweather, “The Child for Adoption.” (MTA) CAS fonds 1001 Series 536.

“normal physically and mentally?” The role of the agency doctor was debated, and “to what extent” they did or should “bind [themselves] by the doctor’s decision?”¹²⁸

The example of “epilepsy” was used as a case where the doctor’s services were helpful in determining the weight of background information, specifically Dr.

Norma Ford Walker, at the University of Toronto:

If we have a child where there is epilepsy in the background, she has been good enough to appraise the situation for us, and in some cases I think she has felt, as far as she can see, this child has not a very great chance of inheriting it. In other cases she has said, ‘Yes, she has a predisposition to it. Nevertheless, let me point out that only a certain percentage get it anyway whether they are predisposed or not.’ She usually ends up with some remark like, ‘I do hope this point will not hinder this child being adopted.’¹²⁹

Another social worker described a similar case at her own agency, stating: “epilepsy is strong in the background. The mother showed signs in her twenties and the grandmother in her early forties.”¹³⁰

The normalizing, practical work of interpreting hereditary conditions that social workers did was conveyed through international, professional journals. The interpretation work of the Toronto CAS was highlighted, in this regard, in a review of international approaches to adoption placement.¹³¹ In the original article being cited, Helen Carscallen demarcated unadoptable children as “children with limited intelligence, who could not adjust adequately in any family, children whose antecedents were known to have Huntington’s Chorea or children with such physical

¹²⁸ Kirkpatrick and Fairweather, “The Child for Adoption,” 23.

¹²⁹ Kirkpatrick and Fairweather, “The Child for Adoption,” 24 (MTA) CAS fonds 1001 Series 536.

¹³⁰ Ibid.

¹³¹ Margaret Kornitzer, “Difficult and Unadoptable Children,” in *Child Adoption in the Modern World* (London: Putnam--Wyman and Sons, 1952), 199-214.

disabilities as *syphilis or epilepsy*.”¹³² Within the Toronto CAS, she said, these children “form the group where we consider the risks too great for adoption placement” and the possibility of making relationships depended on the removal of barriers not even thinkable under the present social arrangements.¹³³

Another expert, speaking to social workers at a Toronto adoption institute, challenged a too utilitarian approach that relied on fixed disease categories, saying she understood the desire to get good advice from “competent authorities” but reminded social workers that there was still a great deal of uncertainty. According to Fairweather, cases of epilepsy, like diabetes and heart disease, were good examples of subjects where “the medical profession [was] not too sure;” few of these conditions were “idiopathic” and the majority were due to “injury at birth or accident so it is not an inherited thing.”¹³⁴ She restated that she based her position on the best advice available, but encouraged social workers to be more pioneering and use uncertainty to their advantage because “in the sciences there are still many unknown factors;”¹³⁵

The best we have been able to get from our medical consultants is that if you have some pathology repeated in the family history then you may want special consultations on that situation in order to be as clear as you can; but without repetition I think we have been comfortable (and not

¹³² Helen Carscallen, Adoption Worker CAS of Toronto, Draft article of final version in the *International Child Welfare Journal*, “Some Psychological and Social Aspects of Legal Adoption,” (1952): 4 [emphasis added] (MTA) CAS fonds 1001 Series 536.

¹³³ Carscallen, “Some Psychological and Social Aspects of Legal Adoption,” 4 (MTA) CAS fonds 1001 Series 536; See also: Frances MacKinnon, “Adoption of Children With Handicaps,” (1954):16-25 (MTA) CAS fonds 1001 Series 540.

¹³⁴ Kirkpatrick & Fairweather, “The Child for Adoption,” 24 (MTA) CAS fonds 1001 Series 540.

¹³⁵ Kirkpatrick & Fairweather, “The Child for Adoption,” 25 (MTA) CAS fonds 1001 Series 540; Kornitzer, “Difficult and Unadoptable Children,” 199-214.

just because we think it is nice but because our consultants have steered us in that direction) that unless you get a repetition, it is not serious.¹³⁶

Another question frequently debated by social workers was “how much information to give adoptive parents?” Social workers were cautious about how to translate background information to adoptive parents, encouraging each other to only include information that would help parents “answer the child’s questions about his natural parents as he grows older.”¹³⁷ They did not trust parents with the information, potentially, because it might become a self-fulfilling prophecy. Social workers believed that parents hung on to folk ideas when it came to understanding current medical science, arguing they had to deal with “hang-over” cases from the previous era, such as Lily’s. These fears appear to have been amplified in the 1970s, as the Department of Welfare discussed the possibility of destroying records because of parental requests for background information.¹³⁸

In the 1950s social workers described one of the difficulties of interpretation work as negotiating popular understandings of science,

We deal with a lot of hangover cases. For, instance, with tuberculosis, unless the child has come in contact with it after birth, the chance of him catching it is nil. You can leave that information out because it is not pertinent, even though his mother may have had tuberculosis. In the community, because of fear of tuberculosis over the years, we still have people say, ‘We know that medical science says you do not inherit it but we have heard so and so and we are still afraid of it.’ Community attitude drags behind medical science in that way. We know that venereal diseases still hold that fear for people, yet we know that

¹³⁶ Kirkpatrick & Fairweather, “The Child for Adoption,” 24 (MTA) CAS fonds 1001 Series 540.

¹³⁷ Mary Speers, “Speech to Protestant Children’s Homes,” 9 (MTA) CAS fonds 1001-Series 540; Eleanor Lemon, “Rear-View Mirror: an Experience with Completed Adoptions” 1959:1-16. (AO) RG 29 Adoption Files.

¹³⁸ See for example the case of Lily earlier in the chapter. For the discussion on destroying records see: “Ad Hoc Committee on the Retention of Adoption Records.” Child Welfare Branch- Director’s Files 1976-1978, (AO) RG 29-107.

medical science can be very conclusive now about a person who may have been exposed to venereal disease.¹³⁹

One social worker imparted that the doctor, and head of a clinic that advised her agency, believed the only time a background illness might have any bearing in adoption cases was if the child had an identical twin with the same condition. This led to lengthy discussions about the relationship between mental illness and heredity. The discussions demonstrated that not only scientists interpreted the facts of inheritance: parents like social workers, as non-scientists, were equally involved.

Social workers debated whether or not potential adoptive parents should be told about background conditions that were not likely to develop until adulthood, and asked themselves who they were trying to protect. Did adoptive families differ in this regard from other families who did not have a choice and had to take what came? It remains one of the central paradoxes of adoption that social workers both emphasized and denied the child's origins.¹⁴⁰ They tried to gain as much knowledge about the child's origins as possible, arguing it was central fitting children and parents together. At the same time, social workers denied the significance of a child's origins in order to re-imagine kinship, advocate the policy of secrecy over confidentiality, and sever legal ties to birth (or first) families and communities.¹⁴¹

¹³⁹ Kirkpatrick & Fairweather, "The Child for Adoption," 24-25 (MTA) CAS fonds 1001 Series 540. Rayna Rapp discusses the importance of parents' interpretations of inheritance after amniocentesis and genetic counseling in: Rayna Rapp, "Heredity, or: Revising the Facts of Life," in *Naturalizing Power: Essays in Feminist Cultural Analysis*, ed., Sylvia Yanagisako and Carol Delaney (New York: Routledge, 1995), 69-86.

¹⁴⁰ Sally Sales, *Adoption, Family and the Paradox of Origins: A Foucauldian History* (London, New York: Palgrave, MacMillan, 2012).

¹⁴¹ Sales, *Adoption, Family and the Paradox of Origins*; Herman, *Kinship by Design*; Barbara Yngvesson, "Going 'Home': Adoption, Loss of Bearings, and the Mythology of Roots," *Social Text* 74, Vol.21, no.1 (Spring 2003): 7-27.

Either way, the importance of scientific and medical knowledge in shaping social policy and “regimes of living” was not in doubt.

Naturalization

Adoption was enmeshed in the perennial debate about whether differences in human behavior, ability and experience could be attributed to *nature* versus *culture*. In turn, the nature-nurture debate remained interwoven with ideas of “race” in science; “[T]heories of racial difference are one of the oldest and most enduring features of European imperialism.”¹⁴² In her own history, Patricia Jasen found the debate was an important part of the context for understanding studies of childbirth in Northern Canada. The study of childbirth by European settlers was driven by a desire to assess and compare their own level of civilization, and the same motivations, according to Donna Varga, underpinned the colonial science of child development.¹⁴³

In the adoption context, *naturalization* refers to the process whereby researchers in the human sciences tried to naturalize adoption through discoveries about nature-nurture as well as psychological studies of attachment and identity, all of which were supposed to ensure good placements and prevent breakdowns.¹⁴⁴

Ellen Herman described four major types of research studies that adoption workers participated in, as an extension of the eugenics movement: nature/nurture studies,

¹⁴² Patricia Jasen, “Race, Culture, and the Colonization of Childbirth in Northern Canada,” *Social History of Medicine* 10, no.3 (1997): 384; Nancy L. Stepan. *The Idea of Race in Science: Great Britain 1800-1960* (London, Connecticut, Archon Books, 1982).

¹⁴³ Donna Varga, “LOOK -- NORMAL: The Colonized Child of Developmental Science,” *History of Psychology* 14, no. 2 (2011): 149.

¹⁴⁴ Herman, *Kinship by Design*, 3-4.

outcome studies, predictive studies and field studies.¹⁴⁵ She believes the scope of the studies reflects the fear shared by professionals and policy-makers and helps to explain their reluctance to advocate adoptions.

Although it is not clear whether all social workers shared these fears, collectively they still tended to describe adoptive families as “substitutes for the natural families of children” and as “second-best.”¹⁴⁶ Because adoption was assumed to be “second-best” for both child and couple, greater attention was given to the emotional adjustment of potential parents, who authorities believed had to deal with the psychological baggage of their childlessness/infertility and their unconscious views about “illegitimacy.”¹⁴⁷

The production of facts about children in care increased as professions developed numerous social technologies (such as height-weight chart ratios) to measure child development outcomes.¹⁴⁸ The model of comparative research allowed for the categorization and evaluation of “adoptable” children through a variety of activities and devices that were used to obtain “inscriptions” as part of normal scientific activity.¹⁴⁹ The significance of inscription activities is that they are assumed to have “a direct relationship to the ‘original substance’” and all prior activity, or controversy, about the meaning of the output is ‘bracketed off’ and the

¹⁴⁵ E. Herman <<http://darkwing.uregon.edu/~adoption/studies/index/html>. July 20, 2005.

¹⁴⁶ “Childcare and Adoption Services,” *Report of the Ministry of Community and Social Services*, (1951):15. (AO) RG 29-01-410; Helen Carscallen, Supervisor of Research & Publicity, CAS and Infant’s Homes of Toronto, “The Old Order Changeth” *The Social Worker*, Vol.20 (3) February (1952): 16-21.

¹⁴⁷ Helen Carscallen, “Some Psychological and Social Aspects,” 8 (MTA) CAS fonds 1001 Series 536, “Adoption Files” Files #1-6 (1949-1977).

¹⁴⁸ Turmel, *Historical Sociology of Childhood*.

¹⁴⁹ Bruno Latour and Steve Woolgar. *Laboratory Life: The Construction of Facts*. Princeton, Princeton University Press, 1986.

“end diagram is taken as the starting point.”¹⁵⁰ Once an inscription is available all previous activities and processes are forgotten and called “merely technical.” Latour argues that those who are “able to translate others’ interests into [their] own language carries the day...[and science is] one of the most convincing tools to persuade others of who they are and what they should want.”¹⁵¹ However, as I have tried to show, scientists are not the only ones engaging in this process. Social workers found reasons for others to be interested in what they had to offer, aligning the goals of others (such as scientists, doctors, officials) with their own.

While social workers and social reformers are frequently referred to as utilizing scientific knowledge and methods developed by others, little historical work has been devoted to the material-discursive practices of social workers, with respect to their own “world-making” activities. Social workers developed their own normalizing practices through translation work in adoption. Through “dividing practices” they created new categories of people: adoptable and unadoptable children, adoptive parents, and social workers who could tell the difference.¹⁵² Herman argues that “unimpeachable tools” were needed as part of the new “professionalizing” strategy used by social workers to make adoption scientific. This

¹⁵⁰ Latour and Woolgar. *Laboratory Life*, 51.

¹⁵¹ Bruno Latour, “Give Me a Laboratory and I will Raise the World,” in *The Science Studies Reader*, ed., Mario Biagioli (New York & London: Routledge, 1999), 259; Bruno Latour, *The Pasteurization of France* (Cambridge, Mass., Harvard University Press, 1988).

¹⁵² The definition of dividing practices comes from: Adrienne S. Chambon, “Foucault's Approach: Making the Familiar Visible,” in *Reading Foucault for Social Work* ed., Allan Irving, Adrienne S. Chambon, and Laura Epstein (New York, Columbia University Press, 1999), 67.

meant “devising technical means of determining the elusive qualities of *adoptability* in children and parental *suitability* in adults.”¹⁵³

Many of the early twentieth social technologies developed as part of the physical hygiene movements and national efforts to improve infant and maternal mortality rates. The campaign to save the nation’s children was part of the wider response “to fears of racial contamination and decline...[as] churches, voluntary associations, physicians, social scientists and governments searched for ways to promote national regeneration.”¹⁵⁴ Medical historian David Armstrong argues it is easy to miss what was “innovative” about the fear of infant death: “the invention of infant mortality” as a measure of a society’s level of civilization constructed “scientific motherhood” as the solution to the problem.¹⁵⁵

Once the threat of infant mortality was reduced, greater attention was given to the science of development and childrearing, and after WWII the federal government became interested in national health as a whole. Physicians introduced height-age and age-weight charts, and psychologists focused on normal development, which gave mainly middle-class parents something with which to compare their own child’s development.¹⁵⁶ With the growth of psychiatry and psychology new “normalizing” technologies were developed in the mental hygiene and child development fields. Two important ones were the I.Q. test, made popular in the

¹⁵³ Herman, “The Paradoxical Rationalization,” 351 [emphasis added].

¹⁵⁴ Jasen, “Race, Culture, and the Colonization of Childbirth,” 394.

¹⁵⁵ Armstrong cited in Jasen, “Race, Culture, and the Colonization of Childbirth,” 394. The “processes of medicalization” extended to assimilation policies aimed at status Indian and Inuit women in Northern Canada.

¹⁵⁶ André Turmel, “Childhood and Normalcy: Classification, Numerical Regularities, and Tabulations.” *International Journal of Education Research* 27, no. 8 (1998): 661-72.

1920s and 1930s and used as a “mental measure,” and the Gesell Infant Schedules designed to measure psychological development and normalcy. Both of these standardized tests were used widely by adoption social workers in Ontario CAS, from the 1930s to the 1950s.¹⁵⁷

In North America, the IQ test, imported from Europe, was refashioned and used to measure intelligence, believed to be a “fixed” and inherited substance, in order to stream children in the education system, and, in extreme cases, prevent them from “contaminating” the gene pool.¹⁵⁸ Although the use of IQ testing failed as a means of proving innate heredity differences between “racial” groups, it continued to be used throughout the 20th century (i.e. to explain single-parenthood, inequality) despite deepening criticisms and numerous controversies.¹⁵⁹

Early adoption social workers used IQ tests as a “proxy” for social class, a practice that, according to Herman, was exemplified in the words of a leading U.S. expert: “[Y]ou must bear in mind that there are first-class, second-class, and third-class homes.”¹⁶⁰ Herman suggests that only “[I]n a meritocratic society, [was] intelligence a defensible rationale for social distinctions. It appeared to produce

¹⁵⁷ Documentary evidence from Ontario Archives (AO) and (MTA) See also: P. Phillips *Blood Not Thicker Than Water: Adoption and Nation-Building in the Postwar Baby Boom*. Unpublished M.A. Thesis, Queen’s University, 1995. From 9 hours of oral testimony with one Ontario adoption social worker at an Eastern Ontario CAS in 1995.

¹⁵⁸ Richard C. Lewontin, Steven Roke and Leon J. Kamin, “IQ: The Rank Ordering of the World,” in *The "Racial" Economy of Science: Toward a Democratic Future*, ed., Sandra Harding (Bloomington & Indianapolis, Indiana University Press, 1993), 142-161; Nancy Stepan, “Biological Degeneration: Races and Proper Places,” in *Degeneration: The Dark Side of Progress*, ed., J. Edward Chamberlin and Sander L. Gilman. (New York, Columbia University Press: 1985), 97-120.

¹⁵⁹ Nancy L. Stepan, *The Idea of Race in Science: Great Britain 1800-1960* (London, Connecticut: Archon Books, 1982); Paul Rabinow, "Dalton's Regret and DNA Typing," *Culture, Medicine, and Psychiatry* 17, no.1 (1993): 59-65. Later work exposed the initial fabrications of Cyril Burt’s twin studies upon which intelligence science was based, yet it continues to be used and replicated by researchers.

¹⁶⁰ From a quote found in a child-placing manual in 1919 reported in: Ellen Herman, "The Paradoxical Rationalization of Modern Adoption," *Journal of Social History* 36, no.2 (2002): 351.

hierarchy legitimately.”¹⁶¹ In Ontario, terms such as “over-placing” and “under-placing” operated as a type of short-hand, to refer to matching children with potential parents according to social class. But they also tended to reproduce assumptions about the inheritance of intelligence, with implications for social policy. *Over-placing* referred to placing a “mediocre” child in a middle-class home with educated parents, whereas *under-placing* meant depriving a child with a good social history, by placing them in a “mediocre” (read working-class) home. Ontario social workers at the CAS defended matching in adoption practice well into the 1950s and 60s.¹⁶²

Along with matching religion, intelligence, race, and by default, social class, in the 1920s and 1930s the new adoption professionals in the U.S. began to include another tool: the Gesell Schedules, which were “developmental scales beginning at birth.”¹⁶³ Arnold Gesell founded the Yale Clinic of Child Development, and as a respected psychologist and pediatrician his research was shared and translated widely throughout Canada and the United States.¹⁶⁴ Walkerdine suggests that many problems of child development arose with the introduction of universal schooling and the normative expectations associated with institutions, rather than simply

¹⁶¹ Herman, "The Paradoxical Rationalization," 351.

¹⁶² These terms were first described to me in previous oral history taken with Ontario adoption social worker at an Eastern Ontario CAS. Patti Phillips, *Blood Not Thicker Than Water: Adoption and Nation-Building in the Postwar Baby Boom* (M.A. Thesis, Queen's University, 1995).

¹⁶³ Herman, "The Paradoxical Rationalization," 351; Also Ellen Herman, "Families Made by Science: Arnold Gesell and the Technologies of Modern Adoption" *ISIS*, 92 (December 2001): 684-715.

¹⁶⁴ Herman, "The Paradoxical Rationalization," 339-385.

emanating from the child as natural object.¹⁶⁵ New “behavioral” problems arose in the classroom, requiring greater administration.¹⁶⁶

By 1950, the Gesell and Stanford-Binet tests were widely used in adoption placements in Canada and the U.S. Adoption workers requested assistance from Gesell, and adoption provided the “real-world” system for psychological knowledge, enabling the expansion of psychology’s power into more realms of existence. Adoption experts from the Gesell clinic traveled to Canada and spoke at conferences in Ontario.¹⁶⁷ Normalizing technologies such as these were promoted at conferences, institutes, and in publications, lending credibility to the claim that child placers needed specialized training because they could no longer rely on “the transparency of material signs and symbols,” or superficial observations.¹⁶⁸

Scientific adoption practices were in line with reform-minded “positive” eugenic goals, made explicit in a (1952) book by Margaret Kornitzer called *Child Adoption in the Modern World*. In it she described adoption as a “technique for improving the mental health and stability of the community as a whole, as well as

¹⁶⁵ Valerie Walkerdine cited in Cathy Urwin, “Constructing Motherhood: The Persuasion of Normal Development,” in *Language, Gender and Childhood*, ed., Cathy Urwin, Valerie Walkerdine, and Catherine Steedman (London: Routledge, 1985), 164-202.

¹⁶⁶ Kari Dehli, “Fictions of the Scientific Imagination: Researching the Dionne Quintuplets,” *Journal of Canadian Studies* 29, no. 4 (1994), 4. See also: Sharon L. Snyder and David T. Mitchell, “Out of the ashes of eugenics: diagnostic regimes in the United States and the making of a disability minority.” *Patterns of Prejudice* 36(1) (2002): 79-103. Diane B. Paul, *The Politics of Heredity: Essays on Eugenics, Biomedicine, and the Nature-Nurture Debate* (Albany, SUNY Press, 1998).

¹⁶⁷ Two examples are Dorothy Hutchinson and Mary Fairweather, both of whom spoke at Adoption Institutes in Toronto and National Adoption Conferences. In 1952, the Staff bulletin at the Toronto CAS announced as part of ‘upcoming events’ that Dr. L. B. Ames, Director of Research at the Gesell Institute was going to be guest speaker at the First Annual Meeting of the Nursery Education Association of Ontario (MTA) CAS fonds SC 1 Box 90 File #4.

¹⁶⁸ Herman, “The Paradoxical Rationalization,” 352.

the lives of some children and some adopters."¹⁶⁹ Still, she was critical of overly cautious approaches to placement saying:

Records of illegitimate children's heredity are usually extremely defective and do not allow of eugenic prognoses; [but] even people with a "respectable" background are often vague about their grandparents' health and personality or the known mental troubles of relatives!¹⁷⁰

Her comments reflected the new moral imperatives of healthism: the duty to *be* healthy, the obligation to *know*, and to *act*. Poor recordkeeping was not simply a technical problem it was a historical problem of people's resistance to being described. While more obvious in the case of "illegitimate" births, there were similar impediments to getting at the "truth" in genealogically intact families. The reasons why health information could be "interrupted" and difficult to get at were due to the difficulty of memory, willful secrecy, and forgetfulness—all of which interfered with the goal of eugenic intervention.¹⁷¹ In the case of "intact" families with secrets, the bodily substance of children themselves concealed potentially dormant, defective genes, which evaded prevention strategies if they were not discovered. In contrast, the hereditary records of "illegitimates" were defective because of a literal lack of information, so the problems of prediction and prevention happened after the fact, distinguishing the "practical work of heredity" that social workers did from the work of genetic counselors.

One of the paradoxes of the postwar era was that geneticists like Sheldon Reed argued for "racial homogeneity" while, simultaneously, claiming that mixed-

¹⁶⁹ Kornitzer, "Difficult and Unadoptable Children," 214.

¹⁷⁰ Ibid.

¹⁷¹ Kornitzer, "Difficult and Unadoptable Children," 199-214.

race children were biologically the “best prospects for adoption,” compared to other “weaker” prospects.¹⁷² In the 1940s and 1950s, the “most common” reason given for seeking genetic counselling was to “evaluate newborns for adoption placements.”¹⁷³ Stern says that on a hierarchy of concerns, the first was to match and predict the child’s likely development on the Gates’ skin “colour” scale, based on racial characteristics, in order to determine whether a child could pass as white.¹⁷⁴ After skin color, the most common concerns that genetic counsellors tested for were: “epilepsy, consanguinity (usually cousin marriage), mental deficiency and mongolism, schizophrenia, and 14 more conditions.”¹⁷⁵

Theories and philosophies about adoption were shared and debated amongst Western countries, and the policies of the Ontario CAS became part of these discussions. Kornitzer portrayed the Toronto Children's Aid Society as progressive, because their criteria for rejecting a child were more flexible than other agencies, and they had begun to experiment with early placements and “hard-to-place” children. She compared this to the conservative views of an international medical expert on adoption, writing in the *International Child Welfare Review*, who reasserted the primary role of physicians in determining a child’s adoptability.

Dr. Vialette claimed doctors should not allow mentally deficient children to be adopted, demanding lengthy observation and testing; moreover, “[C]hildren with a bad heredity, with diseases or abnormalities of any kind should be considered

¹⁷² Alexandra Minna Stern, *Telling Genes: The Story of Genetic Counselling in America* (Baltimore, John Hopkins University Press: 2012), 65.

¹⁷³ *Ibid.*, 67-69.

¹⁷⁴ Minna Stern, *Telling Genes*, 67-69.

¹⁷⁵ *Ibid.*, 63.

unsuitable for adoption."¹⁷⁶ He framed the problem as a conflict between humanism and national (social) interest, implying one was based on *emotion* (e.g. rescue) versus *reason* (e.g. science):

From the *humanitarian* point of view [children of bad heredity] need a favourable *environment* perhaps even more than the others. But from the *social standpoint* there seems to me to be no doubt that normal children should be given priority, and the most promising amongst them, as they represent the hope and future of society.¹⁷⁷

Kornitzer provided facts to challenge his "cool French logic," stating there were more adoptable applicants in Great Britain (as in Canada) than available "normal" children, so he ignored the fact "that the children of subnormal heredity are *also* the future of society, and if they are not to be its hope they may well prove to be its *despair*."¹⁷⁸ Bad heredity was not the only thing that made children unadoptable but also those with "gross behaviour difficulties... extremely bad environmental backgrounds since babyhood; the children of prostitutes; children with precocious and abnormal sexual experience; [and] those who have been violently mishandled."¹⁷⁹ It was not only genes that were inherited and reproduced over generations, but also "bad environments," and this is where skilled adoption workers had a role to play. Some children had been so "disordered" that they could only be placed with "extreme caution and after successful psychiatric treatment," and adoption should not be mistaken for the solution. She articulated one of the key

¹⁷⁶ (Dr. Jacques Vialatte in France, quoted in Margaret Kornitzer, "Difficult and Unadoptable Children." In *Child Adoption in the Modern World* (London: Putnam--Wyman and Sons, 1952), 204.

¹⁷⁷ Dr. J. Vialatte in Kornitzer, "Difficult and Unadoptable Children," 204 [emphasis added]

¹⁷⁸ Kornitzer, "Difficult and Unadoptable Children," 204

¹⁷⁹ *Ibid.*

contradictions of scientific adoption, "[M]an by his own efforts cannot become perfect or make his society, though it is *the great modern fallacy* to believe in such a possibility."¹⁸⁰

New Trends in Postwar Adoption

Between 1940-1950 three new trends emerged in adoption practice: earlier placement of infants, earlier casework with unmarried mothers, and a focus on the new social category of "hard-to-place" children. At the end of the 1940s, adoption practices were not uniform across Canada and social work leaders and educators began to promote the policies of more progressive U.S. agencies that were placing children under 6 months of age, sometimes directly from the hospital. Early placement was portrayed as more "normal" for parents and child because parents were able to watch the development of "a completely dependent baby," a "cementing agent" as "dependence fosters love."¹⁸¹

According to one social worker, unlike other provinces, Nova Scotia had begun experimenting with early placements in the 1930s. Those responsible had no "deep convictions" with respect to placing "handicapped" children except "to disregard the old unproved shibboleths and try anything."¹⁸² However, they still made distinctions between children with "pathology" and those who were "handicapped" in some way. Pathology was defined as "disease or abnormal bodily condition," in contrast to handicap "a more general term...relative to adoption placements, twins or triplets are handicapped children as are children of minority racial groups where there is little

¹⁸⁰ Kornitzer. "Difficult and Unadoptable Children," 205.

¹⁸¹ Mary Speers, "Case Work and Adoption," *The Social Worker*, 16, no.3 (Feb.1948): 19.

¹⁸² Frances MacKinnon, "Adoption of Children With Handicaps," 1954 (MTA) CAS fonds 1001 Series 540.

diversification of placement opportunities.”¹⁸³ Disease thresholds, (what counted as evidence of disease and suffering), were debated by experts within social and institutional contexts, in order to justify or not particular interventions.¹⁸⁴ Handicap, on the other hand was an overarching concept, not strictly defined by clinical or functional frames but referred to “anything in his racial, religious, physical or mental background which is an impediment to adoption placement.”¹⁸⁵ In a circular fashion, parental and normative expectations, and a lack of social supports available to parents of children with physical disabilities or mental health problems, contributed to the degree to which something was perceived to be an impediment.

Professional social workers in Ontario were cautious, restricting early placements to cases where the mother’s decision to relinquish was considered a mature one, the child’s suitability had been established, and the child was found to be “in good physical condition.”¹⁸⁶ Discourses that linked children’s rights to the psychological security of early development within a *home* spurred agencies to conduct research to find the “ways and means” to place children earlier.¹⁸⁷

Because most of the *infants* “released for adoption” came from unmarried parents social workers tried to do casework (interviews, assessments and detailed

¹⁸³ MacKinnon, “Adoption of Children With Handicaps,” 1954:16 (MTA) CAS fonds 1001 Series 540

¹⁸⁴ Anne Marie Mol and Marc Berg, “Differences in Medicine: An Introduction,” in *Differences in Medicine: Unraveling Practices, Techniques, and Bodies* (Durham and London: Duke University Press, 1998), 9.

¹⁸⁵ MacKinnon, “Adoption of Children With Handicaps,” 1954:16 (MTA) CAS fonds 1001 Series 540

¹⁸⁶ Speers, “Case Work and Adoption,” 19.

¹⁸⁷ M. Speers, Helen Carscallen, Kathleen Sutherton, and L. May Harris. “Placement of Infants Under 6 Weeks of Age,” A Study Made at the Request of the Public Health Department of Harvard University, Published as “Adoption Trends” for CAS and Infants Homes of Toronto, 1954:2 (MTA) CAS fonds 1001 Series 540.

information gathering) with mothers sooner. This would facilitate the related goal of earlier placements of children, which depended on social workers getting detailed knowledge about the background histories of children, to determine whether the child was adoptable. There was a concerted push for the state, through the social agency, to accept legal responsibility for the child right away rather than waiting for a placement to become available. Psychological discourse provided the rationale; “[I]t is unsound to force a continuing responsibility for a relationship that has been emotionally severed” creating more conflicts for both parent and child.¹⁸⁸ Even though adoption was officially a legal process, social workers continued to stress that the skilled services of a caseworker were necessary to determine the readiness of the mother to relinquish her child and the suitability of adoptive parents for a particular child.¹⁸⁹

Adoption leaders drew on liberal feminist discourse to argue that casework must deal with the way that “our culture” continues to penalize mothers in particular, and to defend themselves against charges of condoning the morally and socially inappropriate behaviour of unmarried mothers.¹⁹⁰ Rehabilitation was framed as an issue of mothers’ rights and as something that must extend beyond the “surrender of their children,” the provision of casework might keep them from turning to the “financial lures of the black market.”¹⁹¹

¹⁸⁸ Mary Fairweather. “New Trends in Adoption,” *Adoption Institute Proceedings*, 1952:10 (MTA) CAS fonds 1001 Series 540.

¹⁸⁹ *CWC*, Draft report (1955): 28-29 (AO) RG29 files.

¹⁹⁰ Katherine Sutherland, *Report of Supervisor of Unmarried Parents Department to the Board of Directors*, 1955. (MTA) CAS Fonds 1001 Series 531 Board/Committee Minutes.

¹⁹¹ Fairweather, “New Trends in Adoption,” 1952:9. (MTA) CAS fonds 1001 Series 540.

Social work leaders advised members of the profession to consider the needs of unmarried mothers when they publicized their services. It was hard to compete with private services when public agencies (such as the CAS) asked unmarried mothers to plan a period of time in a maternity home, asked her to place her baby in foster care until a home was found, and sometimes charged her for expenses at the same time.¹⁹² In contrast, private services often paid her expenses, had her baby taken directly from the hospital with someone she knew, and allowed her to return home.¹⁹³ Burns argued that, under these circumstances, the unmarried mother “was unwilling to recognize and accept” the value of “case work service,” and the “resistance” of the unmarried mother would never be overcome if agencies did not revamp their thinking.¹⁹⁴

Through the guiding vision of therapeutism, (associated with the objectivity of science and the healing power of medicine) good casework was increasingly conflated with securing adoptions. The Canadian Welfare Council agreed that adoption planning and earlier placement of infants provided more realistic solutions to indecisive mothers. Whereas only ten or fifteen years earlier mothers were encouraged to keep their children, modern caseworkers were advised to use temporary boarding home placements more cautiously; “[C]aseworkers should avoid the danger of re-inforcing the mother's conflict in those situations where she will not

¹⁹² Phyllis Burns, “Is Our Adoption Policy Sound?” *The Social Worker* 18, no.4 (April 1950). For an excellent history of private practice in Quebec see Andrée Lévesque, “Deviant Anonymous: Single Mothers at the Hôpital De La Miséricorde in Montreal, 1929-1939” (Toronto: Copp-Clark Pitman, 1991).

¹⁹³ While this happened in some cases not all private services unfolded this way; mothers with fewer means were expected to work off their debt in maternity homes and didn’t choose the adoptive parents. However, sentimentality was described as the “rule” in these adoptions.

¹⁹⁴ Burns, “Is Our Adoption Policy Sound”? 3.

make a decision as long as she is provided a means of escaping it."¹⁹⁵ Working with mothers before the birth of the child was supposed to ensure that she was making the “right,” “realistic,” and “permanent” decision, and to establish if she wanted help *placing* the baby, now equated with “the problem of illegitimate pregnancy.”¹⁹⁶

The trend toward earlier placements was supported with research undertaken in the late 1940s and early 1950s that asserted the need to establish “early...parent-child relationships.”¹⁹⁷ Child development studies by Arnold Gesell, and the maternal bonding research of Dr. John Bowlby, Harry Harlow and (later) Dr. Spock were influential in adoption and social workers helped to extend the research into new contexts.¹⁹⁸ Bowlby’s research on infant and maternal bonding shaped psychoanalytic social work literature, adoption theory and child-rearing advice literature and had a profound impact on child welfare law and custody cases, despite the fact that the research was roundly criticized.¹⁹⁹ There is still a dearth of scholarly research that connects childrearing advice to the contributions of female-dominated professions, through the science of adoption.

One early example, that suggests a path for future research, was the home economics department at Cornell University, which instituted an extraordinary

¹⁹⁵ *Services to Unmarried Mothers*, Canadian Welfare Council, (CWC) Draft report (1955), 28. (AO) RG29 files).

¹⁹⁶ Speers et al, “Placement of Infants Under 6 Weeks,” 1954:2 (MTA) CAS fonds 1001 Series 540.

¹⁹⁷ Ibid.

¹⁹⁸ Donna Haraway, *Primate Visions: Gender, Race, and Nature in the World of Modern Science* (New York, and London: Routledge, 1989).

¹⁹⁹ Mosoff, “A Jury Dressed in Medical White and Judicial Black,” 229.

program called “practice babies.”²⁰⁰ The department took advantage of the readily available local supply of foster children and adoptable infants to teach privileged young women (students) how to be scientific mothers.²⁰¹ These children were highly sought after in the adoption market. The home-economics program ran from 1900-1969 and taught young women the art of “mothercraft,” with babies supplied by local welfare agencies and orphanages. Their techniques resembled the same strict schedules designed in the Dionne experiment in the 1930s;

In 1919, the first practice baby, named Dicky Domecon [named] for ‘domestic economy,’ came to Cornell. Cornell secured infants through area orphanages and child welfare associations. Babies were nurtured by the students according to strict schedules and guidelines, and after a year, they were available for adoption. Prospective adoptive parents in this era desired Domecon babies because they had been raised according to the most up-to-date scientific principles.²⁰²

The politics of gender contributed to the program’s inception as well as its end, but the fact remains that home-economics, for a time, provided a scientific niche for women:

Flora Rose, an early proponent of the program, believed that babies were essential to replicate the full domestic experience. Albert Mann, Dean of the College of Agriculture, called the apartments ‘essential laboratory practice for women students.’ As time passed, however, new research in child development pointed to the need for a primary bond with a single caregiver, and social changes in the lives of women made the practice house focus on domesticity seem old-fashioned. In addition, by the late 1960s, the ideology most prominent in the college favored hard science over

²⁰⁰ Future research might explore how home-economics departments in Canadian universities either closed, or transformed into child studies, and promoted scientific motherhood (such as the University of Guelph).

²⁰¹ Thanks to Glenda Wall for sharing this. The quotes are taken from the following web site: <http://rmc.library.cornell.edu/homeEc/cases/apartments.html>. More information is available at: <http://blogs.plos.org/wonderland/2011/01/04/real-live-practice-babies/>.

²⁰² The quote is taken from the website: <http://rmc.library.cornell.edu/homeEc/cases/apartments.html>.

practical applications. By 1969, the year the college changed its name, practice apartments were dropped from the Cornell curriculum.²⁰³

Likewise, the CAS of Toronto had quietly begun its own experiments with early placements in 1941, continuing between 1940-1950, and later “substantiated” by studies conducted by John Bowlby and the “Minnesota and Iowa [twin] studies.”²⁰⁴ In the early 1950s, the CAS of Toronto undertook a study in conjunction with the Harvard University, to study children who had been placed for adoption under six weeks of age, and it was considered the first of its kind.²⁰⁵

The Public Health Division of Harvard University, the Children’s Bureau in Washington, and the Canadian Welfare Council had “all expressed an interest in a study of [early placement] practice” and this led to a systematic study and identification of criteria for their procedures, examining the “original premises”, the validity of evidence, and evaluating placement outcomes for everyone involved.²⁰⁶ The CAS studied all the children placed between 1950-51 who were under six weeks of age, (50 children total). Infants who were placed quickly could

²⁰³ <http://rmc.library.cornell.edu/homeEc/cases/apartments.html>. Rima Apple describes the making of a scientific niche in home economics in: Rima Apple, “Constructing Mothers: Scientific Motherhood in the Nineteenth and Twentieth Centuries,” *Social History of Medicine* 8, no.2 (1995): 161-178.

²⁰⁴ Fairweather, “New Trends in Adoption,” 1952. (MTA) CAS fonds 1001 Series 536. Twin studies, in the second half of the 20th century, are now regarded as highly controversial and a form of pseudo-science meant to rationalize eugenic measures. While disability activists, critical legal theorists and evolutionary biologist Stephen Jay Gould are among those who have criticized these notorious studies, medical geneticists still draw on them to argue that some differences between “races,” called group differences, need to be acknowledged in order to adapt our social arrangements accordingly. Stephen Jay Gould, *The Mismeasure of Man* (New York & London: W. W. Norton & Company, 1981). For a contemporary treatment see the medical geneticist James Crow’s paper entitled, “Unequal by nature: a geneticist’s perspective on human differences,” *Daedalus* (Winter 2002): 81-87. He describes the scientific fact of inequality as an “uncomfortable” but necessary truth.

²⁰⁵ Carscallen et., al, Draft Report, “Placement of Infants Under Six Weeks,” (1950) (AO) OACAS fonds F819.

²⁰⁶ Speers et al, “Placement of Infants Under 6 Weeks,” 1954:4:3 (MTA) CAS fonds 1001 Series 540

only be evaluated on their background information because the agency did “not consider it possible to appraise a child’s development in other terms.”²⁰⁷

The CAS began to speak more openly about the practice between 1950-1954, arguing that their findings helped to determine standard “safeguards” and “minimize the risks involved,” borne out later in the success described by the Toronto CAS.²⁰⁸ The CAS reported that only “1% [of children had] been returned to the agency because of physical or mental defect,” though it was not clear whether or not the agency had effectively screened out “defective” children.²⁰⁹ The preference to place a child as early as a few weeks old, was supported by research from child psychology, casework experiences, and psychiatric findings “which emphasized the advantages that would accrue to a child in establishing early roots in a permanent home.”²¹⁰ Nonetheless, some social workers were still hesitant, adhering to older beliefs that:

not enough can be ascertained about potentialities before the age of two or more to insure [sic] appropriate placement ... It is, I hope (and believe from available evidence) a newer trend, whenever possible, to make use of all the available scientific aids and professional skills to secure reasonably accurate estimations faster and earlier and to use these responsibly for appropriate choice of parents.²¹¹

²⁰⁷ Ibid.

²⁰⁸ See Carscallen, Speers, et.,al, Draft Report “Placement of Infants Under Six Weeks of Age,” (1950); Speers, “Report to the Board of Control City of Toronto--by Adoption Department,” (1951), (MTA) CAS fonds 1001, Series 536; Carscallen, “Some Psychological and Social Aspects,” (MTA) CAS fonds 1001 #146464, Box 76; Doris Guyatt, “Adoptions in Ontario.” *Ontario Association of Children Aid Societies Journal* 10, no.9 (1967); Eleanor Lemon “Rear-View Mirror: An Experience With Completed Adoptions,” (AO) SC1 Box 116, File # 2.

²⁰⁹ Speers et al, “Placement of Infants Under 6 Weeks,” 1954:2 (MTA) CAS fonds 1001 Series 540

²¹⁰ Carscallen et.,al, ‘Placement of Infants Under Six Weeks,’ (OA) RG 29 Files, SCI 115 File #8.

²¹¹ Fairweather, “New Trends in Adoption,” 9 (MTA) CAS fonds 1001 Series 540.

Proponents encouraged agencies to make early placements, arguing the practice had been going on for years, with “varying knowledge about the child they placed.”²¹² Constructions of risk differed according to the age of children, based on theories of development, with three social categories: the infant, the toddler, and the older child. Most other agencies in Canada still held to the “six month rule” of observation before placing children, but the Toronto CAS leadership concluded that “the risks involved in early placement [were] minimal compared to the advantages.”²¹³ Well-known adoption expert and educator from the Gesell Institute, Mary Fairweather, stressed that the goal was not only early but “appropriate placement.”²¹⁴ The language of professional development applied to the task of placement was laden with positivist terminology: evaluating, observing, forecasting, gauging, uncovering, and estimating potential. Nevertheless, the older, subjective technology of “matching,” which placed inordinate value on resemblance and *sameness*, did not disappear, but was instead modified.

The new factors taken into account were “physical fitness, appearance, mental ability, and personality” as well as agency regard for religious preference by natural parents. Only through “careful observation, thorough knowledge and expert consultation” could placement be achieved, factors that were, supposedly, “neglected” in earlier “haphazard placements.”²¹⁵ Other factors that were weighed in the decision to place an infant under six months were whether the:

²¹² Ibid., 8. (MTA) CAS fonds 1001 Series 540.

²¹³ Carscallen, “Some Psychological and Social Aspects,” 1952:4 (MTA) CAS fonds 1001.

²¹⁴ Fairweather, “New Trends in Adoption,” 7. (MTA) CAS fonds 1001 Series 540.

²¹⁵ Ibid.

Mother has made a mature decision to relinquish her child, has received prenatal care, where the birth has been normal, and where a pediatrician has stated that the child is healthy. As well, the social history must include enough information, both on the side of the Mother and the Father, to afford reasonable confidence that there is no inherited deficiency either mental or physical.²¹⁶

The exhortation to “understand” and know the child treated the child as an extension of social work knowledge.²¹⁷ It also required additional labor on the part of the birth and foster mothers (e.g. prenatal care for baby health, disclosure of personal information, testing and history-taking). When a baby was not placed directly from the hospital, they were typically placed in a boarding home. Risk assessment began with the “un-scientific” subjective observations of the foster mother--as part of the research team--followed by the expert opinions of medical, psychological, and genetic authorities. A series of steps had to be followed: “he is carefully observed by the foster mother;” “her impressions are shared with the visiting nurse and social worker;” “the baby is seen regularly by a competent pediatrician and the agency psychologist” who “underlines the baby’s developmental *tendencies* through psychometric examination;” and when necessary “we draw on the expert advice of psychiatrists,” and “Dr. Norma Ford Walker, an outstanding authority on heredity on this continent.”²¹⁸

Nevertheless, some social workers, cognizant of the fragile community attitude toward social workers, recognized the profession was faced with a dilemma,

²¹⁶ Carscallen, “Some Psychological and Social Aspects” 1952:4-5. (MTA) CAS fonds

²¹⁷ Amy Rossiter, “Unsettled Social Work: The Challenge of Levinas’s Ethics,” *British Journal of Social Work* 41 (2011): 980-95.

²¹⁸ Carscallen, “Some Psychological and Social Aspects,” 5 (MTA) CAS fonds 1001 #146464, Box 76.

“[T]here is distinct value in learning more about the child *himself*, especially where social history is lacking or inadequate but the benefits accruing from such a study may be outweighed by the ill effects of several replacements in boarding homes.”²¹⁹ They themselves had argued that infants needed security sooner and child welfare agencies in Ontario had proposed the solution was good *adoptive* homes.

Adoptability and Eligibility: Developing a Standardized Package

Between 1954-1958, the development of adoption standards in the United States and Canada became the main priority of the CWLA, USCB, and OACAS. Children born to unmarried mothers were automatically considered deprived, and a threat to their own and their child’s health. One U.S. Senator and adoptive father, who pushed for laws on the “black market,” warned of increased juvenile delinquency because “improperly placed children” would end up as “social misfits and menaces,” echoing the words of the Toronto CAS Director.²²⁰

The Director of the newly amalgamated CAS and Infants’ Homes of Toronto aligned adoption social work with the goals of modern democracy. He drew on naturalizing discourse to warn that children who did not have a home had a hidden “social handicap” because they lost a sense of belonging. While less visible than a physical handicap, he believed these children would inevitably become a “burden to society,”

[G]enerally speaking they cannot live successfully and productively in our highly competitive democratic society of

²¹⁹ Burns, “Is Our Adoption Policy Sound”?5.

²²⁰ Herman, *Kinship by Design*, 147.

the twentieth century....They are not able to use to [sic] anything like maximum capacity the talents provided them at birth; they cannot accept responsibility, nor can they be counted on reliable to carry out tasks which may be assigned to them. Such people are never sufficiently trusting of others, that they can get close enough to anyone cooperatively to share in ideas or undertakings which are essential to the maintenance of sound democracy. In other words, they cannot assume their right and proper role as useful, creative citizens.²²¹

Professional social workers equated “specialized social knowledge” in adoption with other democratizing processes.²²²

Social workers claimed to provide the final translation of the child’s needs and *appropriate environment*: “[T]he social worker who takes into her hands the tremendous responsibility of planning the future of the helpless infant together with these experts tries to establish the intellectual and emotional needs of the child.”²²³

Some admitted that the new science of development made it harder to know a child completely because the “complications...of understanding him as an individual” increased as child grew older due to the “effects of his experience upon his developing personality,” a difficulty that required “skill, patience and sensitivity to evaluate and frequently to treat before placement can be considered.”²²⁴

While the “pre-placement medical examination” was always part of “good adoption practice,” the newer trend was to gain as much knowledge as possible

²²¹ Stewart Sutton, “Report for CAS Annual Meeting,” (1951): 5 (MTA) CAS Fonds, Box #146041 File 1. In part, these arguments were rationalizations for the decision to merge the two agencies into one. The stated goal was to limit the number of individuals unmarried mothers came into contact with so that more children could be placed.

²²² Herman, “The Paradoxical Rationalization,” 363; OACAS “Report of the Committee On Child Care And Adoption” (1952).

²²³ Carscallen, “Some Psychological and Social Aspects,” 5 (MTA) CAS fonds 1001 #146464, Box 76.

²²⁴ Fairweather, “New Trends in Adoption,” 8 (MTA) CAS fonds 1001 Series 540.

about “prenatal” and “birth history,” placing more expectations on birth mothers. Psychological tests had long been used within agencies “to gauge the mental capacity of a given child” but there was a trend towards earlier and ongoing testing with infants, beginning with “observations” at three weeks of age, and “serial testing at four weeks,” strengthening links with child guidance and hygiene clinics. Yet, there was a great deal of ambiguity surrounding the tests. Social work leaders reminded front-line social workers that the tests on their own offered less validity but could be used as adjuncts to other types of “information available for estimating [the child’s] potential abilities.”²²⁵ Once again, when tests turned out *not* to be the “immutable mobiles” they were supposed to be, older forms of knowledge and methods of observation were brought to bear.²²⁶

Getting an accurate history of the child was supposed to provide key information “in understanding and forecasting the development of the individual children” and it was weighted in relation to “careful awareness and observation of post-natal development.”²²⁷ Assessment of the *toddler* applied to children between six months and two years of age, where three things had prevented their early adoption placements: an indecisive birth mother, a child born prematurely with some physical disability, and little background information was available or where “some known negative factor” on “one side” is known. In the latter case, careful observation of the “little person[s]” development was used to assess future

²²⁵ Fairweather “New Trends in Adoption,” 7 (MTA) CAS fonds 1001 Series 540.

²²⁶ Annemarie Mol and John Law, “Regions, Networks and Fluids: Anaemia and Social Topology” *Social Studies of Science*, 24, no.4 (1994): 657.

²²⁷ Fairweather “New Trends in Adoption,” 7 (MTA) CAS fonds 1001 Series 540.

adoptability, and there was a preference to foster until sure, shifting weight to the foster mother's descriptions.²²⁸

For some toddlers, the decision to foster rather than find a permanent adoption placement prevailed, especially children who showed "promise" for a foster home but something negative in the child's history prevented "straight adoption placement."²²⁹ Social workers were told by psychiatrists that the cut-off age for a child to form a close bond with "any parent person" was age two, the point a permanent parent was needed, so agencies tried to board babies with a "view to completing adoption at a future date."²³⁰ The kind of parents and home environment selected, in this case, required "flexibility in meeting the child's needs at all times" and a realistic understanding that the adoption could be postponed indefinitely.

The third category, or the Older Child, was a child over the age of two who had not been placed earlier for "a variety of reasons," usually the age at which the child became a permanent ward of the CAS. These children required more work on the part of the social worker, to assess the child as an "individual" with specific needs, if she was to "plan intelligently." A long list of questions was developed pertaining to older children's needs. Scientific validation now provided parents who desired infants with reasons for their choice by showing the emotional advantages of early adoptions and challenging ideas about the risk of "cradle" adoptions.²³¹ But, as

²²⁸ Carscallen, "Some Psychological and Social Aspects," 5-6. (MTA) CAS fonds 1001 #146464.

²²⁹ *Ibid.*, 6 (MTA) CAS fonds 1001 #146464.

²³⁰ *Ibid.*, 6 (MTA) CAS fonds 1001 #146464.

²³¹ Herman, *Kinship by Design*, 133

Herman observed, it also meant the definition of the older child became younger after 1945.

Within social work, transplanting metaphors flourished and intervention was constructed as part of a natural process: “what are the roots he brings to the new soil; how strong, how tender, how injured?”²³² Social workers argued they had the skills to determine what kind of environment was needed in the adoptive home, “[I]t seems to be a question of effecting a balance in the delicate transplanting process between such factors as innate characteristics, the richness of the environment and the warmth of affectional relationships which the growing child receives.”²³³

The rationale for early placements, now considered “sound” practice, depended on two things: the development of a rigid selection criteria and the provision of casework to unwed mothers.²³⁴ Rigid criteria would lead to better placements, community confidence and a growing demand for children. Because “demand exceeded supply” social workers believed parents would become “willing to accept more risks” to get a child in order to experience “the joy of caring for infancy” so they also tried to develop standards with an eye to getting children adopted sooner.²³⁵

A review of experiments with early placements was undertaken and although the original criterion was only for children *over* six weeks of age, it came to define the ideal adoption. Social workers began to construct an interpretive framework,

²³² Carscallen, “Some Psychological and Social Aspects,” 7 (MTA) CAS fonds 1001 #146464.

²³³ Carscallen, “Some Psychological and Social Aspects,” 7. (MTA) CAS fonds 1001 #146464; Kornitzer, *Child Adoption in the Modern World*.

²³⁴ Speers et al, “Placement of Infants Under 6 Weeks,” (1954): 2 (MTA) CAS fonds 1001 Series 540

²³⁵ Ibid.

positioning themselves at the center of an adoption knowledge network. It comprised a diverse group of actors and different kinds of data, structured around the unmarried mother, the child, and the adoptive parents:

1. Knowledge that the mother of the baby to be placed has had prenatal medical care and a healthy pregnancy.
2. That her decision to consent to an order of adoption has been consistent and realistic.
3. That a detailed family history concerning both the mother and putative father gives assurance of normalcy throughout.
4. That the birth history was normal.
5. That the baby be at least 14 days of age before placement.
6. That two paediatricians— one representing the agency and then one chosen by the adopting parents – found the baby to be in good physical condition prior to placement.
7. That adopting parents be selected for these young babies on the basis that they seemed able to accept the unknown risks involved and appeared able to help a child develop his potentialities, whatever they might be.”²³⁶

The adjustment of the unmarried mother was measured by her “adherence” to the plan after the adoption placement was completed. After a period of time, she was evaluated to see if she had been given enough time to reach a “realistic decision to relinquish her child.”²³⁷ When it came to evaluating the child and adoptive parents, social workers assessed “the physical and emotional health and intellectual development of the child,” the “interaction between the child and the adopting parents,” and “their adjustment.”²³⁸ Fitness was not only about “looking” like family, families had to “feel” real so emotional compatibility took center stage.²³⁹

²³⁶ Speers et al, “Placement of Infants Under 6 Weeks,” (1954): 3 (MTA) CAS fonds 1001 Series 540.

²³⁷ Ibid.,3-4 (MTA) CAS fonds 1001 Series 540.

²³⁸ Ibid.,4 (MTA) CAS fonds 1001 Series 540

²³⁹ Herman, *Kinship by Design*, 125-133.

The average time the unmarried mother received casework, before the placement, was three months, and statistics were used to provide support for the new trends: “80% [of mothers] were consistent in their request for adoption,” “76% saw their baby before placement,” none of the mothers changed their minds. The average age of (birth) mothers and fathers in the study was 24 and 27, respectively--challenging any pre-conceived ideas about young “girls” getting pregnant. Mothers were “considered normally healthy,” with no “complications,” good “emotional health” and no apparent disturbance about her decision. In “84% of cases” the “relationship was close” between the two unmarried parents and “76% of putative fathers of the children placed were known personalities,” a comment meant to assuage cultural assumptions about her sexual promiscuity. For the remainder of cases, when the father was unknown, caseworkers expressed confidence in the third party knowledge they received, meaning they trusted the birthmothers’ accounts.²⁴⁰

Early placements were more likely to be completed when the unmarried parent(s) resembled ideal adoptive couples, who were married, heterosexual and tended to be white, Christian, and middle-class. The average age of the adoptive parents was 34 for mothers and 36 for fathers with the average length of marriage ten years. In half of the cases they’d had a previous adoption and 98% appeared happily married and were open to the “pleasures of adopting parenthood.”²⁴¹ All of

²⁴⁰ Speers et al, “Placement of Infants Under 6 Weeks ,” 4 (MTA) CAS fonds 1001 Series 540

²⁴¹ Speers et al, “Placement of Infants Under 6 Weeks,” 5 (MTA) CAS fonds 1001 Series 540.

Strabismus: refers to “deviation of the eye which the child cannot overcome.” Strabismus: refers to “deviation of the eye which the child cannot overcome.” *Donland’s Illustrated Medical Dictionary* (1994), 1584.

the couples were eager to have the adoptions legalized and planned to tell children of their adoption--a conventional sign of good emotional and mental health.

A range of old and new social technologies was used to evaluate children including development scales, growth charts, I.Q. and Rorschach tests. Eligible children were normal, full-term births with an average weight of “slightly over 6 ½ lbs;”

In view of the risk of the development of some fairly rare *congenital defects* which do not show up by six weeks of age, it is interesting to note that in these particular consecutive 50 cases, no serious physical defect occurred by the time these children were at least one year of age....90% showed no *health problems*. In the other 105, or 5 children, difficulties included a celiac child; one with tendency to celiac; a child who had pneumonia twice in two years; a child with strabismus; and a hypertonic child... *Psychological examinations* given at an average age of 14 months showed an average rating of 114, and children were considered to be *normal in their development*.²⁴²

The study coordinators suggested that more evaluation was needed, but they maintained that a “reasonably consistent relationship between the *anticipated development* and this early psychological estimate of *intellectual development* “ was present, giving them the confidence to place infants sooner.²⁴³

Despite the rigid criteria, social workers still argued the most important factor when it came to placing children at six weeks was acceptance by the adoptive parents of the child “as he is.” Approximately 84% of the children were reported as having made a “better than average adjustment up to this stage of their

²⁴² Speers et al, “Placement of Infants Under 6 Weeks,” 5 (MTA) CAS funds 1001 Series 540 [emphasis added].

²⁴³ Ibid.

development.” The 14% of children who made a “satisfactory adjustment” included five children with minor health problems, whom adoptive parents accepted without “undue concern,” but may have affected the “child’s ability to adjust.” In contrast, Speers described a troubling case involving “acute sibling rivalry between *two adopted children of superior intelligence*” with indications that the parents were *not coping* well with this, to emphasize why the attitude of the adoptive parents was key to an adoption success.²⁴⁴

The results of the early experiments justified continuing the practice of early placements and the agency began to refine criterion, for children *under* six weeks of age, to make more placements sooner. The CAS had already placed more children than ever before, between six weeks of age and three months old. In cases where less information was known about the putative father’s background, workers put emphasis on taking more time to “observe and evaluate the health and development of the child.” In the Toronto agency it was typical for “one psychological evaluation” to be conducted by six weeks of age.²⁴⁵ The value of “medical and psychological aids” was still considered a “supplement and not substitute for individual knowledge of that intangible, [but] most important attribute, the child’s unique *personality*.”²⁴⁶ Although personality was something “science [had] yet to

²⁴⁴ Ibid.

²⁴⁵ Speers et al, “Placement of Infants Under 6 Weeks,” 1954:6 (MTA) CAS fonds 1001 Series 540.

²⁴⁶ Fairweather, “New Trends in Adoption,” 1952: 8. (MTA) CAS fonds 1001 Series 540.

explain” adoption leaders argued that social workers were “endowed with the necessary perceptions” and had begun to recognize its early manifestations.²⁴⁷

Adoption workers were added to the list of qualified experts that included “obstetricians, pediatricians, nurses and others particularly sensitive to and gifted in understanding infants,” who did not simply discover but constituted personality.²⁴⁸ As one of the new trends in adoption, assessing personality depended on “necessary perception” and advocates argued that all adoption workers should be trained in such perceptions because these were “valuable adjuncts to the knowledge of the effects of environment upon personality which their professional training and experience has already impressed upon them.”²⁴⁹ Social workers described themselves as possessing *keen observational and interpretive skills*, based on knowledge of heredity and environment, proposing they could tell the “difference” between children. The Toronto CAS reported they had come to learn:

[there were]constitutional differences in the way babies approach their environment. Some are placid, some restless; others reach out to everything and everybody; and then there are those who watch patiently yet alertly for the world to come to them. There are technical terms for these basic differences; the recognition of them is the important thing.²⁵⁰

²⁴⁷ Fairweather, “New Trends in Adoption,” 1952: 8. (MTA) CAS fonds 1001 Series 540; Theo Carlson. *The ABC of Adoption*, 1955 (3rd Printing) AMA:Chicago, pp.3-7; W. Allen Davis, PhD. *Sources of Personality*, 1955 (3rd Printing) AMA: Chicago, pp.7-12. (AO) RG 29- 1-622, Deputy Minister of Public Welfare, James Band (files and letters various)

²⁴⁸ Fairweather, “New Trends in Adoption,” 1952:8. (MTA) CAS fonds 1001 Series 540, Carlson, T. *The ABC of Adoption*, 1955 (3rd Printing) AMA:Chicago, pp.3-7 (AO) RG 29- 1-622, Deputy Minister of Public Welfare, James Band (files and letters various); Dehli, Kari "Fictions of the Scientific Imagination: Researching the Dionne Quintuplets ". *Journal of Canadian Studies* 29, no. 4 (1994). Dehli argues that nurses, like social workers, were added to the list of other experts who constituted the categories they claimed to discover. In adoption it encompassed personality, IQ, race, and emotional maturity.

²⁴⁹ Fairweather, “New Trends in Adoption,” 1952: 8. (MTA) CAS fonds 1001 Series 540.

²⁵⁰ Carscallen, “Some Psychological and Social Aspects,” 5. (MTA) CAS fonds 1001 #146464, Box 76.

The Adoption Committee of the OACAS claimed there “should be no physical bar on adoption,” but made room for exceptions based on the prospect of a deteriorating condition or one requiring institutional care. Physical factors were evaluated by a "qualified physician" who was required to produce a detailed report, including a Wasserman test for syphilis.²⁵¹ The committee agreed that no child was eligible until "as complete knowledge and prognosis as possible regarding defects and pathological conditions of the child are available."²⁵² The definition of adoptability was both vague and narrow as it referred to the child's *capacity to develop* in a family setting and *profit* from family life. How it was to be determined was variable. Any known factors that concerned the worker had to be followed by a specialist and if none was available written guidance was required.²⁵³ Depending on the age of the child and the amount of background history social workers obtained about the maternal and paternal "antecedents" the type of physical and mental health evaluations varied in depth.²⁵⁴

As the popularity of adoption increased, agencies became choosier about who was eligible to adopt. They evaluated couples based on “previous life history, personality, and present adjustment” choosing those whom social workers felt were “strong enough to stand the stresses and strains which might eventuate if the child

²⁵¹ OACAS, “Report of the Committee,” 3 (AO) OACAS fonds F819. The fact that the test for syphilis was singled out reflects assumptions about children born to unmarried mothers, and how moral narratives complicated medical fears.

²⁵² Ibid..

²⁵³ OACAS, “Report of the Committee,” 4 (AO) OACAS fonds F819.

²⁵⁴ Ibid.

did not develop as anticipated.”²⁵⁵ Adoption had always been described as “different” and now adoptive parents were valued as intentional parents. Social workers argued their decision to form a family was based on a “love relationship rather than a blood relationship,” and described the ideal qualities of therapeutic adoptive parents:

We seek parents who are physically and emotionally healthy, uncrippled [sic] by their own experience in life and competent to meet the normal hazards of the future...If we have been accurate in our evaluations, they are people whose marriage is on a firm foundation; who have been able to face and handle the disappointment and frustration of their own childlessness and without undue bitterness or recrimination; who can turn to adoption with comfort and happiness and who are together in their desire to adopt; who want children more for the joy of giving than for the pleasure of receiving; who are competent, not only to provide normal physical needs, but to nourish, stimulate and derive satisfaction from the emotional and spiritual growth of their child toward a secure and independent adulthood of their own.²⁵⁶

Social workers of the past were portrayed by modern social workers as needlessly focusing on material assets and housekeeping standards. One popular example was an illustrated story of a typical adoption called “The Chosen Baby” showing “the social worker...on a preliminary visit to the home, looking (of all places!) under the bed!”²⁵⁷ In truth, the records of social workers continued to include initial impressions.²⁵⁸

²⁵⁵ Speers et al, “Placement of Infants Under 6 Weeks,” 2 (MTA) CAS fonds 1001 Series 540.

²⁵⁶ Fairweather, “New Trends in Adoption,” 10. (MTA) CAS fonds 1001 Series 540

²⁵⁷ Ibid.

²⁵⁸ Patti Phillips, “‘Financially Irresponsible and Obviously Neurotic Need Not Apply’: Social Work, Parental Fitness, and the Production of Adoptive Families in Ontario, 1940-1965,” *Histoire sociale/Social History* 39, no. 78 (2006): 329-58. My claim is based on previous oral testimony with Susan Peters.

Therapeutic adoptive parents, in contrast, were expected to provide descriptions of their own parents' relationships, and their motivations to adopt. While social workers believed that parents often gave the answers they thought social workers wanted to hear, some reasons automatically disqualified couples for parenthood. The list included viewing the child as a marital fix, a companion for themselves or another child, unmet ambitions, or the replacement of a lost child.

Increasingly parental styles and level of self-esteem were linked, leading to new technologies for the measurement and prediction of a "successful and productive life."²⁵⁹ Stephen Ward argues that by the 1960s, self-esteem was no longer just a "tool for psychology"; its place in a wider network made it a "truth" effect that was harder to undo.²⁶⁰ Historians like Gleason have documented the importance of psychology's efforts to popularize the science.²⁶¹ The profession of social work was part the network of support for psychology during the postwar years, and helped to make the concepts of "self-esteem," personality, and emotional "security," matters of fact through adoption practice.²⁶²

Ironically, by the end of the decade the same critical gaze that had been focused on children and unmarried mothers was directed at potential adoptive parents. Margaret Mead, writing for the popular magazine *Redbook*, criticized parents who were unwilling to adopt "flawed" children. She described the paradox

²⁵⁹ Stephen Ward. "Filling the World with Self-Esteem", *Canadian Journal of Sociology*, vol.21 (1) Winter (1996) 1-20.

²⁶⁰ Ward refers to "truth" in the Foucauldian sense of a truth regime.

²⁶¹ Gleason, *Normalizing the Ideal*.

²⁶² See for example Barbara Cruickshank's analysis of the regulatory regime of self-esteem, especially regarding single-mothers, In *The Will to Empower: democratic citizens and other subjects* (Cornell University Press: New York & London, 1999).

of adoption in a widely circulated article entitled: “Wanted: Perfect Babies,” read and shared by social workers.²⁶³ Parents were chastened for feeling they were being unjustly discriminated against by having to provide a physical exam, along with details of their health history, hereditary information, economic, religious, and emotional status. She pointed out the irony of adoptive parents, who expected perfect children, from parents almost identical to themselves (e.g. in class, cultural and educational background), but who would be somehow willing to “relinquish” their own ideal infants. She, inadvertently, tapped into discomfiting feelings associated with scientific adoption, as some parents secretly asked themselves “why didn’t they merit a ‘better’ child?”²⁶⁴ Moreover, couples who adopted “different” looking children were themselves scrutinized because, only ten years earlier, agencies only gave “gilt-edged” children to “gilt-edged” families.

Challenging Social Workers’ Authority

Historians in the U.S. and Canada argue that a number of changing social conditions led to the reform of adoption practices after WWII, including a “deep humanitarianism” and a critique of social workers’ retreat from welfare work. Carp for one maintains that, previously, social workers were reluctant to place “children with physical and mental handicaps” for adoption, but after the war they, supposedly, “broadened the definition” of adoptability to “include any child...who needs a family and who can develop in it, and for whom a family can be found that can

²⁶³ Margaret Mead, “Chosen Parents,” Reprinted in: *Redbook* (1960). (AO) RG29-31-1-5. [emphasis added]

²⁶⁴ Dorothy Sangster, “The Little Girl Nobody Wants” *Chatelaine* (December 1955):20-21, 32-40.

accept the [child] with its physical or mental capacities.”²⁶⁵ However, the changes in public agency practices were not uniform across Canada, or the United States, and parents who were rejected by local agencies because of rigid criteria began to go abroad to adopt.²⁶⁶

Some historians contend that the power of “Nurture over Nature” reversed in the 1970s, the postwar “adoption consensus” collapsed, and bio-determinism was reasserted in popular and scientific discourses.²⁶⁷ Melosh links the change to various social forces such as “nationalist critiques of trans-racial adoption, anti-imperialist critiques of international adoption and [activities of] the adoption rights movement” all of which fell back on biological claims “in the construction of family and personal identity.”²⁶⁸ Canadian adoption historians and aboriginal scholars have emphasized how First Nations communities, together with the National Association of Black Social Workers in the United States, contributed to a cultural shift that challenged ahistorical and individualist conceptions of childhood and children’s rights, in favour of children’s cultural and historical claims.²⁶⁹ The child of the 20th century had become a powerful symbol of the United Nations.²⁷⁰

²⁶⁵ Wayne Carp, “The Rise of Adoptions,” in *Family Matters: Secrecy and Disclosure in the History of Adoption* (Cambridge, Mass.: Harvard University Press, 1998), 32.

²⁶⁶ Carp, *Family Matters*, 34.

²⁶⁷ Barbara Melosh, *Strangers and Kin: The American Way of Adoption* (Cambridge, MA, Harvard University Press: 2002), 88-89.

²⁶⁸ Karen Balcom, “Constructing Families, Creating Mothers: Gender, Family, State and Nation in the History of Child Adoption,” *Journal of Women’s History* 18 (1) (2006):224. Similar discussions about the loss of cultural heritage for First Nation’s Children and the jurisdictional differences of Native children under the Indian Act also took place during the 1970s and 1980s. See for example: P. Angus-Monture *Thunder in My Soul*. Peter Hudson & Brad MacKenzie, “Child Welfare and Native People: The Extension of Colonialism,” *The Social Worker* 49(2) (1981): 63-88.

²⁶⁹ Ernie Crey and Dawn Fournier, *Stolen From Our Embrace*; Sharon Stephens, “Children and the Politics of Culture in “Late Capitalism,” in *Children and the Politics of Culture*, ed., Sharon Stephens (Princeton: Princeton University Press, 1995); Karen Dubinsky, *Babies without Borders: Adoption*

In Ontario, the decline in CAS domestic adoptions by the 1970s was blamed on a decrease in the availability of “healthy white infants,” demonstrating that racial and health concerns prevailed. The decrease in infants to adopt was attributed to the extension of Ontario Mother’s Allowance (OMA) to “unwed” mothers (1959) allowing more women to keep their children, less stigma attached to illegitimacy, the legalization of birth control (1969), and the relative availability of therapeutic abortions. The decline of “blue-ribbon” babies pushed mainly white parents to consider adopting “mixed-race,” non-white children, and other “hard-to-place” children.²⁷¹ The 1960s and 1970s stand out because of the emphasis child welfare agencies placed on advertising and finding homes for hard-to-place children, particularly older children made wards of the state, an issue still with us today.²⁷²

Many of the ads in the 1960s reflected a continuing pre-occupation with racial boundaries.²⁷³ Social workers still tended to focus on placing children with white middle-class couples rather than advocate that unmarried “mixed-race” couples be allowed to marry.²⁷⁴ In the 1970s, many parents who wanted infants without having to contend with long waiting lists returned to private agencies and

and Migration across the Americas University of Toronto Press, 2010. The notorious ‘sixties scoop’ refers to the removal of first nations’ children, who were placed in ‘non-native’ foster care and adoption homes. Their removal is now acknowledged as one in a long line of destructive effects of state-sponsored assimilation strategies--linked to Residential and Industrial Schools.

²⁷⁰ Dubinsky, *Babies without Borders*; Stephens, "Children and the Politics of Culture.

²⁷¹ Phillips ""Financially irresponsible and obviously neurotic," 329-358.

²⁷² Martin Regg Cohn, “Ontario Must Work to Streamline Adoptions,” *Toronto Star, Guelph Mercury* October 10, 2014) A11. The Queen’s park journalist criticized the long waiting period for adoptive parents, simplifying the issue and drawing on gender ideology to say, “it’s not rocket science. It’s motherhood.”

²⁷³ “Children Available for Adoption,” *Toronto Star* December 20, 1961.

²⁷⁴ “Children Available for Adoption,” *Toronto Star* December 20, 1961; Alexandra Minna Stern, *Telling Genes: The Story of Genetic Counselling in America* (Baltimore, John Hopkins University Press: 2012), 65.

international services, with fewer immigration restrictions. Some adoption scholars suggest that the return to biology ostensibly “renewed old fears of the risks of adoption” explaining why after 1970 most adoptions were once again arranged privately and through international agencies.²⁷⁵ However, stories of adoption breakdown continued to appear with regularity in popular media.²⁷⁶

Alternatively, recent work by Canadian historians suggests that the shift to nurture after 1945 was either short-lived, or not a shift after all.²⁷⁷ U.S. adoption historians have argued that testing was abandoned in the 1950s,

Earlier in the century, children who were in any way disabled or whose biological heritage was unknown or contained some pathology were considered a poor risk for adoption, and most placements were delayed until extensive testing of the child’s physical and intellectual development could be undertaken. By the 1950s, much of this testing was abandoned, children were placed much earlier and there were increasing numbers of trans-racial placements.²⁷⁸

However, documentary accounts taken from national conferences, adoption institutes, and government sources indicate that testing and measurement continued in many public agencies in Ontario well into the 1960s. Even though many

²⁷⁵ Barbara Melosh, *Strangers and Kin: The American Way of Adoption*. Cambridge, MA, Harvard University Press, 2002.

²⁷⁶ *Harpers* 2013; *The New Yorker* 2001; Karen Dubinsky, *Babies without Borders: Adoption and Migration across the Americas* (University of Toronto Press, 2010).

²⁷⁷ Veronica Strong-Boag, “‘Children of Adversity’: Disabilities and Child Welfare in Canada from the Nineteenth to the Twenty-First Century,” *Journal of Family History*, 32 (4) 2007:413-432. Gail Aitken “Critical Compromises in Ontario’s Child Welfare Policy”, in *The Canadian Welfare State: Evolution and Transition*, ed, Jacqueline S. Ismail (Edmonton, University of Alberta Press: 1987), 274-299; Miller, *A “blueprint” for defining health*, 2000; Molly Ladd-Taylor, “A Kind of Genetic Social Work,” 67-83.

²⁷⁸ Melosh in Karen Balcom, "Constructing Families, Creating Mothers: Gender, Family, State and Nation in the History of Child Adoption," *Journal of Women's History* 18, no. 1 (2006): 224. See also: Carp and Leon Guerrero, “When in Doubt, Count: World War II as a Watershed in the History of Adoption” in *Adoption in America: Historical Perspectives*, ed, Wayne E. Carp (Ann Arbor, University of Michigan Press: 2002), 200-201.

professionals debated its worth, testing for some children may have expanded. An increase in the numbers and kinds of children who were classified as “unadoptable” suggests a categorical revolution was underway, with a rise in “documented medical disorders,” emotional disorders, new meanings of the “older” child, and other social relational factors, all of which prevented placements [see Table 5.2].²⁷⁹The head of the Adoption Department at the CAS of Toronto even included a category of children with a possible “predisposition” to cancer.²⁸⁰

Table 5.2 OACAS Permanent Wards in Care of Children’s Aid Societies, 1959

Group	Permanent Wards	Provincial Total	Percentage
A	Adoption Probation	2,013	19%
	Custodial Treatment or Some Free Care	1,418	13%
B	Adoption Plans Pending or Preparation*	2,213	20%
C	Unadoptable Children		
	Teenagers/Over 12 years of Age	3, 136	29%
	Strong Family Ties	472	4%
	Race/Mixed-Race	264	2%
	Severe or Fairly Severe Medical Problems	397	4%
	Mentally Defective Need Institutional Care not CAS Foster Care	539	5%
	Severe Emotional or Behaviour Problems	277	3%
	Strong Ties with Foster Parents	105	1%
		10, 834	100

Source: Harold Treen et al, “Study of Permanent Wards of 55 Children’s Aid Societies in the Province of Ontario,” Minister’s Committee on Child Welfare, 1963.* Included infants with medical problems, not clearly diagnosed or who need help before “they will accept parents other than their own.”²⁸¹

²⁷⁹ Michael Rembis,“(Re)Defining disability in the ‘genetic’ age: behavioral genetics, ‘new’ eugenics and the future of impairment.” *Disability and Society* 24, no.5 (2009): 592. Allan Horowitz, paraphrased in Rembis, describes what happened in the last third of the 20th century when psychiatry moved from “dynamic” to “diagnostic psychiatry” as a result of the medical model’s dominance and the rise of pharmaceutical companies. A shared culture of “medicalized mental disorders” was created from diverse interest groups who sought recognition, empowerment, and change.

²⁸⁰ Mary Speers. “Speech to Protestant Children’s Homes on Adoptions Practices,” 1951 (MTA) CAS fonds1001-Box 76.

²⁸¹ OACAS, “A Study of the Disposition of Permanent Wards as of October 1st, 1959” (1959), 1 (AO) RG 29 Files.

By the end of the 1950s, government officials and social work organizations conducted studies to determine what types of children were permanent wards of the fifty-five CAS in Ontario, because forty-eight percent of wards, or 4,808 children in the care of the CAS remained “unadoptable.” The Ontario government commissioned its own study to find out why so many children remained in permanent care. The lead expert stated his general concern for children’s rights given that current knowledge about the “physical and emotional” needs of children indicated the best environment for children to grow up in was a home of their own.²⁸² He pointed a finger at public social workers, holding them primarily accountable because they operated “autonomously” and exhibited “wide variation in standards of service.”²⁸³

He comprised a list of nine problems linked to *variations* in agency practices, the first of which was the lack of “planning” and follow-up for children in care, along with incomplete or inconsistent information in the records about why things were done the way they were. Next, he took aim at the collaborative work between social workers, medical and “psy” experts, comparing the practical interpretation work of social workers to fortune telling, not Science;

Some children were liberally being taken to psychologists and medical doctors for about the same reason people go to fortune tellers. eg.[sic] Children who were slipping in their grades in school and who had been through a number of moves, children who had enuresis and behavior problems. The question of validity and use being made of intelligence

²⁸² Harold Treen et al, “Study of Permanent Wards of 55 Children’s Aid Societies in the Province of Ontario,” Minister’s Committee on Child Welfare, 1963:1 (AO) RG 29-01-501.

²⁸³ Ibid.

tests in the files appeared hazy and confused. Very little recognition was given to the fact that children, who are emotionally upset over separations and moves, quite often test poorly, and that some of the older children coming into care were culturally deprived.²⁸⁴

Agency policies and practices varied in at least ten ways revealing the difficulty of standardizing adoption, despite pressure to do so. There were differences between agencies in “what constitutes a suitable Adoption home,” “what children can be considered adoptable,” and differences in the timing of placements. Some agencies placed children straight from hospitals, while others still required longer observation periods; some agencies finalized an adoption after six months, while others waited one year. There were also differences of opinion about the value of “psychological findings, social histories and medical reports when considering a child for adoption.”²⁸⁵ Agencies differed again in the use of Court Wardship, and the sharing of resources regarding available adoption homes in different areas, the use of case records, and Institutional Care and Receiving Homes.

Harold Treen leveled one final criticism at agency policies and restrictions in regard to individual applications and standards, illustrated in a personal letter from an adoptive applicant. “Mr. Brown” described as married, wrote that after two years of unsuccessful medical treatment he and his wife were told they could not apply to adopt unless either or both of them were “definitely sterile” or had been married for five years.²⁸⁶ Home studies had been completed four years earlier, but they were still

²⁸⁴ Ibid.

²⁸⁵ Treen, “Study of Permanent Wards,” 17 (AO) RG 29-01-501.

²⁸⁶ Letter in Appendix, Treen, “Study of Permanent Wards,” 28 (AO) RG 29-01-501.

waiting even though there were children needing homes. He questioned why they could not adopt from another County, or even another Province?

Most of the children that Treen described as “left-over” in the study of permanent wards had been permanently separated from their families or “natural environments,” though a small number still lived with a relative or parents. Children who were “older,” had “physical or mental handicaps,” or were “emotionally disturbed,” were all classified as “hard-to-place,” a category interchangeably used with “unadoptable.”²⁸⁷ Children who were “perfectly normal” but with “certain religions or racial identities...regrettably fall into fall into this category of hard-to-place or “unadoptable.”²⁸⁸ They were considered unadoptable because homes could not be found, or they did not “want” one. These children evoked the greatest concern because they were usually placed in a Hospital, Training School, or Institution for Disturbed Children.

Unadoptable children were re-classified according to thirteen main categories including:

- Religion
- Sex
- Racial Background
- Present Age
- Average time in care since becoming permanent wards (by age)
- Average number of workers per child (by age)
- Average number of placements (for child by age)
- Reasons for Permanent Wardship
- Intelligence Testing
- Schooling
- Emotional Problems
- Physical Problems
- Present Arrangements for Children

²⁸⁷ Treen, “Study of Permanent Wards,” 17 (AO) RG 29-01-501.

²⁸⁸ Ibid.

Multiple entries were possible for any individual child, especially when it came to “emotional problems” and “why parents placed children in permanent care,” indicated by the number of 1,436 circumstances recorded for 814 children, where “unmarried motherhood” was most frequently cited.²⁸⁹ [see Table 5.3 below]

Table 5.3 Reasons for Permanent Wardship of 814 Children in Ontario CAS

Reasons as indicated in files	Children
Unmarried Mothers	241
*Alcoholism	157
Financial Difficulties	149
Desertion of one or both parents	153
Severe marital discord	96
Separation or divorce of parents	103
Infidelity	99
Physical or mental illness	93
Criminal behaviour	55
Death of one or both parents	66
Child extra martially conceived	55
Housing problems	59
Delinquency or incorrigibility of child	25
Severe rejection of the child	34
Inability of the parents to provide minimal physical care	49
Drug Addiction	2
	1436

* Drinking to the extent that it adversely affected family life.

The categories religion, sex, racial background, IQ testing and Schooling are harder to pull apart because they appeared as discreet categories.²⁹⁰ [See Appendix A]

²⁸⁹ Treen, “Study of Permanent Wards,” 4 (AO) RG 29-01-501.

²⁹⁰ A note about terminology is needed. I have retained the original categories as examples of the constitutive work of classification. Hierarchical dividing practices based on Sex, Racial Background, Schooling and IQ--among others--are “truth regimes” to be scrutinized because they are assumed to have a direct relationship to fixed substances and essential truths about children. In turn, they assign social “value” used to match children with parents or otherwise.

The records of 161 children reported no significant emotional or physical problems, but, for the rest, where emotional problems were indicated some of the children had several. The most frequently recorded problem was “abnormal craving for love and attention,” followed closely by “enuresis” or bedwetting, “overly tense and fearful,” stealing, lying, and temper tantrums. Under the classification “Other,” things like “overeating,” “boy crazy,” “nightmares,” “saucy,” and “not coming home on time” were identified, which Treen believed fell under the category “insecure.”²⁹¹

What remained on the list was a doleful inventory of emotional problems linked to children’s behaviour: overactive, destructfulness, fantasy withdrawal, excessive disobedience and stubbornness, soiling, heading banging and rocking, masturbation, stuttering and speech difficulties. One case that was singled out described two twelve year old boys who were “perfectly normal” at birth, but had lived their entire lives in institutional care and were now considered socially maladjusted and emotionally disturbed.²⁹² Treen believed that emotional problems were underreported in many files.

At least thirty different physical problems were reported for the records of 98 of the children in permanent care, with nearly one quarter (or twenty-one children) classified as having a “skin disorder,” seven with a heart defect, seven with eye problems, five with epilepsy and five with hearing problems.²⁹³ The remaining seventy-four children had medical conditions that varied in severity and required

²⁹¹ Treen et al, “Study of Permanent Wards,” 5 (AO) RG 29-01-501.

²⁹² Ibid., 21.

²⁹³ Ibid., 5.

different levels of medical or social support for parents. The long list of physical imperfections and medical conditions that distinguished unadoptable from adoptable children included:

- Brain damage
- Hydrocephalus
- Convulsions
- Physical Deformities
- T.B.
- Club feet
- Child born with V.D.
- Artificial tube in esophagus
- Rickets
- Blackouts
- Bad posture
- Congenital hips
- Hernia
- Spastic
- Muscular dystrophy
- Artificial limb
- Duodenal Ulcer
- Child needs complete set of dentures
- Arrested hydrocephalis
- Hare lip
- Cerebral palsy
- Mongolism
- Dwarf
- Double thumb
- Webbed fingers and toes

One agency practice that was singled out for condemnation was intelligence testing. Many of the children, now perceived as “perfectly adoptable,” lost their chance at being placed in a permanent home because of “excessive” and subjective testing. Children then passed from boarding home to boarding home, ultimately becoming unadoptable because of age and/or emotional problems. The report noted that some agencies had tested children “repeatedly,” as many seven times for the

same child, while others began testing children as early as three months of age and at regular intervals. The validity of the tests was also questioned based on the fact that children constantly moved around.

From their perspective, social workers had difficulty finding homes for all available children who were classified as “handicapped” in some way because of parental expectations and preferences. Unadoptable children still tended to be described as “slow,” non-white, with medical or emotional problems, or with physical “defects” and imperfections.²⁹⁴ Fears about biology and individual health risks never disappeared, and any postwar adoption “consensus” was less stable than imagined. Rather than one form of knowledge (nurture) completing displacing another (nature), interest in the interaction between them continued to shape the activities of the human, social and medical sciences after WWII.

Most actor-network theorists in science studies focus their attention on the closure of controversy in science. As Karin Garrety argues, they tend to avoid topics or controversies that cannot be closed through the statement of a scientific fact or the achievement of consensus.²⁹⁵ Social worlds theorists expand actor-network theory to argue that instead of focusing on the top-down activities of scientists bringing everyone else on board, the central process or activity we should be focusing on is

²⁹⁴ “Review of Infants at the Metropolitan Children’s Aid Society,” [between 1958-60] 1960 (MTA) CAS fonds, Box 85, File # 1. Includes descriptions and statistics of children admitted but not referred or released for adoption; OACAS “A Study of the Disposition of Permanent Wards as of October 1st, 1959,” (AO) RG 29 Files.

²⁹⁵ Karin Garrety, “Social Worlds, Actor-Networks and Controversy: The Case of Cholesterol, Dietary Fat and Heart Disease,” 27, no. 5 (1997): 727-73. She argues that social worlds theory is useful for examining non-closure.

negotiation.²⁹⁶ Knowledge about children and standardized adoption practices are the outcome of “social negotiations” that can only be understood in their institutional, cultural and political contexts.²⁹⁷ The nature-nurture controversy is one such controversy that never dies and, as Diane Paul reminds us, nature-nurture debates remain significant because hereditarian thought is linked to social policies. Such conflicts are usually “closed” by political not scientific judgments, where political opposition ends with the judgment: “it’s just too expensive.”²⁹⁸ This study of adoption provides an empirical example from which to examine non-closure in science and evidence from which to examine contemporary theories of translation.

Bowker and Star have said that actor-network theorists tend to focus on standards of practice, but they argue we need to include the practical, material-discursive work of making classifications and categories themselves.²⁹⁹ Classifications and concepts such as adoptability were a type of boundary object that promoted “cooperation across social worlds.”³⁰⁰ Classification systems contribute to our understanding of stability, as they are “silently embodied” in the “built environment and notions of good practice.” The danger, according to Bowker and Star, is that all the decisions and negotiations that took place beforehand are usually lost to the historical record once in place, treated as

²⁹⁶ Whelan, *Boundary work and Transgression*.

²⁹⁷ Garrety, “Social Worlds.”

²⁹⁸ Paul, *The Politics of Heredity*.

²⁹⁹ Bowker and Star, *Sorting Things Out*, 13-14.

³⁰⁰ Bowker and Star, *Sorting Things Out*: 13; Susan L. Star and James R. Griesemer, "Institutional Ecology, 'Translations' and Boundary Objects: Amateurs and Professionals in Berkeley's Museum of Vertebrate Zoology, 1907-39," *Social Studies of Science* 19 (1989): 387-420.

unimportant.³⁰¹ For the same reason, revisiting the decision-making around the construction of standards and classifications is also one of the places where we can see that things could have been (or could be) otherwise.

I have argued that adoption was a particular professionalizing project for social workers and the strategies of professionalization that they pursued had implications that went beyond the formation of adoptive families. My study provides support for the view of Bowker and Star, who believe that the conditions of production of this work have to be considered because there is so much at stake “epistemologically, politically, and ethically” in building and maintaining standards.³⁰² Every standard and category “valorizes” one point of view over another, and the necessity of “practicality” makes it dangerous because it represents an ethical choice, with consequences that cause suffering for some and not others. While Durkheim argued that all social facts are moral facts, science studies writers contend that all scientific facts are moral (and social) facts. The history of scientific adoption and social work has a lot to tell us about the stakes involved in debates about what substances and discourses will authentically bind us together, and what entitlements of citizenship, or forms of solidarity might follow.

³⁰¹ Bowker and Star, *Sorting Things Out*, 20-24.

³⁰² Bowker and Star, *Sorting Things Out*, 10.

Conclusion

At the Receiving Centre we are interested primarily in what makes Johnny tick. Why does he tick too fast or too slow; why does his alarm go off too often or not often enough; why does he tick too loudly or too quietly; what can we do to help him run happily, securely and confidently in time and tune with all the other tickers in his world ... Nowhere is there an art so difficult to master and yet so rewarding as the ability to deal successfully with the personality of a child.¹

My study of adoption contributes to previous studies that examine how modern power came to operate through the welfare state, particularly, the “scientific and professional resources deployed to modernize the family” and other institutions.² I suggest that the promotion of scientific adoption by social workers, after the Second World War, can be understood as a social movement within the profession that had implications beyond its borders.

A segment of social work leaders tried to improve their occupational position using particular strategies of professionalization and aligning themselves with science, psychology, and medicine to make adoption practice scientific. Social workers drew on, circulated, and translated new forms of knowledge to reimagine and transform children and unwed mothers, who went from being sinners, delinquents, and victims, into maladjusted individuals who could be rehabilitated. They provided scientific studies and resources that were shared within the childhood

¹ NEWS 1, no.8 (June 2, 1952): 5-6 (MTA) Childcare and Adoption Files 1951-1970, CAS fonds SC 90, Box 100 File#4.

² Herman, *Kinship by Design*, 9; Mona Gleason, *Mona Gleason Normalizing the Ideal: Psychology, Schooling, and the Family in Postwar Canada* (Toronto: University of Toronto Press, 1999).

collective, but they also helped to popularize and extend the findings of others through the concept of adoptability.

In the first half of the twentieth-century, the family became an important technology and site of rehabilitation to bring about normal health and social conduct in the child.³ Abnormal health and behaviour was interpreted as the product of poor environment or childraising, and scientific adoption was presented as a solution. Ideas about normalcy within psychology displaced older theories of human nature that were more deterministic, and the normal (meaning healthy, acceptable and typical) was as an ideal to strive for.⁴ Interventions (such as education for mothers or seizing children from “unfit” mothers) were introduced to bring about better physical, mental and emotional health and justified in the name of the social. Through adoption, social workers helped to “consolidate” the welfare state, one guided by a particular therapeutic vision that expanded and rationalized bio-medical authority over what Rose called “life itself.”⁵

Social workers promoted the idea that scientific techniques and findings could be used to discern an objective basis for social responsibilities. In the years between 1940 and 1960, social workers working at the Children’s Aid Societies in Ontario argued that they were particularly qualified to assess the composition and health of Canadian families through adoption case-work, a practice they explicitly

³ André Turmel, “Childhood and Normalcy: Classification, Numerical Regularities, and Tabulations,” *International Journal of Education Research* 27, no. 8 (1998): 662.

⁴ Turmel, “Childhood and Normalcy,” 662.

⁵ Nikolas Rose, “The Politics of Life Itself,” *Theory, Culture & Society* 18, no. 6 (2001): 1-30; Adele E. Clarke, Laura Mamo, Jennifer Ruth Fosket, Jennifer R. Fishman, and Janet K. Shim, “Biomedicalization: Technoscientific Transformations of Health, Illness, and U.S. Biomedicine,” in *Biomedicalization: Technoscience, Health, and Illness in the U.S.* (Durham and London: Duke University Press, 2011), 50-52.

referred to as shaping citizens. The current project explored the strategies social workers used to insert themselves within the developing welfare state, using adoption as a particular professionalizing project. In the process, they helped to redefine professional, familial, and national borders. In so doing, they helped to introduce new measures of normalcy and elevate the role of science in the search for unchanging solidarities (the search for authenticity and connection that transcends the social or cultural) and family formation.

Adoption was one of the arenas where conflicts within the profession, and inherent to the system of professions, were negotiated during the postwar II period. Social work leaders tried to answer the question of what made social work distinct from other professions, by distancing themselves from charitable workers and their female predecessors. They did this by engaging in strategies of translation (forging alliances), interpretation work, and boundary drawing (or social closure) to have their claims to expertise and cultural authority recognized by “the State, other professionals and the general public.”⁶ They still subscribed to gender ideologies when they engaged in boundary-drawing to distinguish professional work from the “haphazard,” unregulated work of (mainly female) unpaid amateurs, philanthropists, and women religious orders. Their irony is that they contributed to the devaluing of

⁶ Tracey L. Adams, "Professionalization, Gender and Female-Dominated Professions: Dental Hygiene in Ontario," *The Canadian Review of Sociology* 40, no. 3 (2003): 269.

care-work and helped to preserve the invisibility of women's unpaid labour, with dire consequences for poor and/or never-married mothers.⁷

Feminist scholars have shown that "professions are gendered institutions" and argued the title of professional (like scientist) is by definition (white) male. But according to Adams, this presents a dilemma: if these terms are by definition "masculine" can female-dominated occupations claim professional status, and when they do, what strategies do they use and how do gender ideologies shape their efforts?⁸ I argue that social work strategies reflected an attempt to imitate the male "medical model" and ethos of professionalism, while also challenging it, a strategy Adams identified with other female-dominated occupations.

Baines, like others, showed how they began to formalize their training and search for a scientific body of knowledge, making "casework...the cornerstone of the profession," and where "investigation, co-ordination, and efficiency the hallmarks of casework practice."⁹ Yet, a tension remained in social work because historically "women's special expertise and place within the professions" rested on "an ideology of service that lionized caring as a virtue particular to women."¹⁰ Social workers had to convince the public, officials, and experts, that social welfare work in adoption was work, and not simply an extension of their natural, maternal duties.

⁷ Carol Baines, "The Professions and the Ethic of Care," in *Women's Caring: Feminist Perspectives on Social Welfare*, ed., Patricia Evans, Carol Baines, and Sheila Neysmith (Toronto: McClelland and Stewart, 1991), 58.

⁸ Adams, "Professionalization, Gender," 269; Donna Haraway, "Modest Witness: Feminist Diffractions in Science Studies," in *The Disunity of Science: Boundaries, Contexts, and Power*, ed., Peter Galison and David J Stump (Stanford: Stanford University Press, 1996), 428-441.

⁹ Baines, "Professions and the Ethic of Care," 57; Paula Maurutto, *Governing Charities: Church and State in Toronto's Catholic Archdiocese, 1850-1950* (PhD diss, York University, 1998).

¹⁰ Baines, "Professions and the Ethic of Care," 55.

They began to construct and make claims to a specialized body of knowledge in adoption, and position themselves as coordinators at the center of a knowledge network.

By the end of the 1940s, many male administrators in the CAS and academics in schools of social work began to argue that a theoretical body of knowledge was necessary if social work was to be taken seriously as a profession, otherwise their work was no different than the good works of the nun or boy-scout! Others worried that the profession was at risk of being overtaken by psychiatrists, psychologists and medical experts. By advancing scientific adoption, social workers invested themselves with a “collective consciousness.”¹¹

Jennissen and Lundy have suggested that “social work’s inattention to the woman question is not surprising.”¹² They alluded to the familiar dilemma described by Adams, who drew on Leslie Bella to argue, social work was “born in the caring work of women...but used the technical and scientific language of men.”¹³ Work at the CAS was considered less prestigious and it was harder to find and keep trained staff. Moreover, the majority of the members of the profession were women but men continued to be overrepresented in leadership positions and by 1973 two-thirds of the faculty in schools of social work were male.¹⁴ Some social work scholars suggest that, in pursuing professionalization, social workers in the 1950s lost the power and community support

¹¹ Herman, *Kinship by Design*, 46.

¹² Theresa Jennissen and Colleen Lundy, *One Hundred Years of Social Work: A History of the Profession in English Canada 1900-2000* (Waterloo, ON: Wilfrid Laurier Press, 2011): 253.

¹³ *Ibid.*

¹⁴ Jennissen and Lundy, *One Hundred Years of Social Work*, 251-253.

that previously sustained them from earlier activism.¹⁵ For example, the leadership did not partake in policy debates over the status of women, distancing themselves from the “larger women’s movement in Canada” and lost an opportunity to take a leadership role, like other “women’s professions,” in their relatively privileged position.¹⁶

From this vantage point, the strategies of interpretation and boundary work represent a seemingly contradictory social movement within the profession, as social workers tried to change the cultural value of social work and redefine a professional identity through adoption. They engaged in boundary work and interpretation work to expand their authority and distinguish their practices as scientific over private adoption providers (such as doctors and religious workers), who they defined as amateurs.

The nature of social work was still gendered, reflecting the social relations of women’s work because it was low-paid and involved prevention and education work with poor women, children and families. However, the task of *placement* was not simply relegated to social workers by more established male professions. Social work leaders engaged in their own scientific claims-making, as they sought to enrol other professionals in their project, establish and secure their jurisdiction over the task of *placement*, and secure a role in the expanding therapeutic state. They used case studies to illustrate the differences between children, and to demonstrate to the public, and instruct professional social workers in the finer points of interpretation

¹⁵ Baines, “Professions and the Ethic of Care,” 59-68.

¹⁶ Jennissen and Lundy, *One Hundred Years of Social Work*, 253.

and discrimination.¹⁷ According to Herman, the “hallmark” of scientific adoption was supposed to be the pairing of “standardization with individualization,” and social workers worked to show the uniqueness of each child and their needs when considering homes. In practice, knowledge was used to match children with parents based on children’s assumed “intellectual, cultural, and social level.”¹⁸ In the end, ideal adoptive families still tended to “resemble” each other, and the dominant cultural ideal as heterosexual, white, middle-class, Christian, and Anglo-Saxon went largely unchallenged.

My case study supports the view that we have to consider more than gender to understand the professionalizing strategies chosen by female-dominated professions.¹⁹ Most accounts of social work history argue that social work abandoned its radical roots, and the move to professionalize had a conservatizing affect on the profession. However, as my case study serves to illustrate, there had always been differences within the profession over what the core goals and work activities should be and whether and how to pursue a professional identity.

At the end of the 1960s, Albert Rose, the President of the CASW, explained why the association did not have the time or resources to prepare a brief on the status of women, nor a response to the final report by the Royal Commission, as to how they might implement the recommendations of the report.²⁰ He defended his stance by telling members of the association that the volume of letters he received on this

¹⁷ Herman, *Kinship by Design*, 49.

¹⁸ *Ibid.*

¹⁹ McPherson, *Bedside Matters*, 9; Adams, “Professionalization, Gender,” 269.

²⁰ Jennissen and Lundy, *One Hundred Years of Social Work*, 253.

issue contained two “divergent and contradictory points of views:” social workers who thought the association had failed by not taking a stronger position on social reform through social action, versus those who believed the Association “had neglected its professional responsibilities to members” by wasting energy on social change and social action.²¹

If we begin with the assumption that social workers did not occupy a single position, or set of interests, to paraphrase Latour, we might instead ask how and whether social work “ends” changed along with the means.²² Feminist science studies theorists add that science is about more than description, it is about commitments to a particular vision of society. Whether or not social workers were successful in improving adoption outcomes, social work leaders invested themselves with a professional identity and brought about a “community of adoption experts operating in state-sanctioned agencies on the basis of systematic training, empirical inquiry, and verifiable results.”²³ The real question, according to Herman, is not whether “kinship by design” surpassed other forms of family making, but “why a new paradigm that involved state power, scientific knowledge, and expert authority became central to family making at all?”²⁴

I draw on Clarke’s concept of translation to demonstrate how “bio-medical framings of ‘regimes of living,’” or rules for how we should live, “have become

²¹ Jennissen and Lundy, *One Hundred Years of Social Work*, 252.

²² Bruno Latour, "Morality and Technology: The End of the Means," *Theory, Culture & Society* 19, no. 5/6 (2002): 247-60.

²³ Herman, *Kinship by Design*, 46.

²⁴ *Ibid.*, 52.

deeply naturalized,” and argue social workers were part of the process.²⁵ She describes translation as a two-way process and form of social legitimation work, whereby “the visual cultures of things medical do the fundamental work of linking medicine to modernity--a cultural ‘good’ indeed.”²⁶ I suggest the same analysis can be applied to understand how social workers helped to link science and medicine to modernity in adoption. They were helpful in “establishing and sustaining medicine [and science] as a cultural good” and reinforcing the cultural authority of science and medicine in family making. Popular images of science and medicine were drawn on by social workers and given new “vividness” through the metaphor of gardening in the nature-nurture debate as a “translation of complex theories for general consumption.”²⁷ In turn, social work translations in adoption influenced experts and supported the professional aims of others, even through the scientific authority and credibility of social workers was ultimately challenged.

Although this is not the first study to examine the emergence of scientific adoption practice it is one of few to examine the process in Canada, specifically Ontario. My examination of how professional adoptions became the norm highlights wider themes in the history of postwar Canada, and social and cultural studies of science. As an empirical example, the study of adoption contributes to science studies approaches that focus on practices by which “scientific knowledge is

²⁵ Adele E. Clarke, “From the Rise of Medicine to Biomedicalization,” in *Biomedicalization: Technoscience, Health, and Illness in the U.S.* ed., Adele E. Clarke, Laura Mamo, Jennifer Ruth Fosket, Jennifer R. Fishman, and Janet K. Shim (Durham and London: Duke University Press, 2011), 107.

²⁶ Clarke, “From the Rise of Medicine,” 106.

²⁷ Marchessault and Sawchuk 2000: 3 cited in Clarke, “From the Rise of Medicine,” 107.

articulated and maintained in specific cultural contexts and translated and extended into new contexts.”²⁸

Like Melosh, I agree that adoptive families have always been “potent sites[s] for the expression of visions of identity and otherness” and the symbolic importance of adoption only heightened after the Second World War.²⁹ Adoption continues to raise fears about boundary-crossing in ways that biologically intact families do not; adoptive families are socially and intentionally formed and perceived to be more “heterogeneous” than bio-families with their assumed sameness.³⁰ The contemporary relevance of postwar adoption is in the questions it poses; for example, to what extent today is science once again being presented as an “antidote...for problems in which it remains foundationally embedded.”³¹

In the aftermath of the crisis in Haiti in 2010 a group of American missionaries was charged with kidnapping children who, as it turned out, had been taken from their families. In response one genetic policy researcher from Duke University proposed that “[s]tandardized DNA testing for international adoptions would help prevent such situations” such as “fraudulent adoptions.”³² She presumed that nature, through the guiding metaphor of language, could speak objectively, and

²⁸ Joseph Rouse, “What are Cultural Studies of Scientific Knowledge,” *Configurations* 1(1992): 6.

²⁹ Barbara Melosh, *Strangers and Kin: The American Way of Adoption*. Cambridge, MA: Harvard University Press, 2002: 88–89; David Kirk, *Shared Fate: A Theory of Adoption and Mental Health* (New York and London: The Free Press, Collier Macmillan Press, 1964); Herman, “The Difference, Difference Makes: Justine Wise Polier and Religious Matching in Twentieth-Century Child Adoption,” *Religion and American Culture* 10 (Winter 2000): 57-98.

³⁰ Melosh, *Strangers and Kin*; Herman, “The Difference, Difference Makes.”

³¹ Deborah Lynn Steinberg, “Reading Genes/Writing Nation: Reith, ‘Race’ and the Writings of Geneticist Steve Jones,” in *Hybridity and Its Discontents: Politics, Science, Culture*, ed., Avtar Brah and Annie e. Coombes (London & New York: Routledge, 2000), 141.

³² Sara Huston Katsanis, “Use DNA to stop child trafficking,” *Globe and Mail*, Feb. 24th 2010 A19. Katsanis is a genetic policy researcher at Duke University in the Center for Genome Ethics, Law and Policy.

directly through DNA to resolve political, historical and criminal conflicts.³³ Genes have been portrayed as “superordinate records of culture, identity and meaning” removed from the bad old science of eugenics when biology was used in “the service of prejudice.”³⁴ In the Haitian case, Christian missionaries arrived in the middle of a national disaster and promised a better life for children in America, through largely unregulated adoptions. As it turned out, many of the children were not officially “orphans.” Their parents had only given consent for children to receive better health and education services but had not relinquished their children.

In contrast to celebrations of (bio) technology, sociologists, bio-ethicists, and other scholars are concerned about the implementation of genetic screening technologies and possibilities for new forms of discrimination in the concept of the genetically normal.³⁵ A feature newspaper story in the “Health” section of the Toronto Star, entitled “The Chosen Ones”--a term typically associated with adopted children--described international ethics debates over in-vitro genetic-screening processes.³⁶ The writer provided a list of conditions that were culturally acceptable to screen for, posed against ideas of physical perfection and performance, presumably associated with the social taint of commercialization and eugenics:

³³ See also Marilyn Strathern, "Displacing Knowledge: Technology and the Consequences of Kinship." In *Conceiving the New World Order*, ed., R. Rapp and F. D. Ginsberg (Berkeley, Los Angeles, & London, University of California Press, 1995).

³⁴ Steinberg, "Reading Genes/Writing Nation," 141.

³⁵ Sarah Cunningham Burley and Anne Kerr, "Defining the 'Social': Towards an Understanding of Scientific and Medical Discourses on the Social Aspects of the New Human Genetics," in *Sociological Perspectives on the New Genetics*, ed., Peter Conrad and Jonathan Gabe (Oxford & Malden, MA: Blackwell, 1999), 149-70; Joan Fujimura, "The Practices of Producing Meaning in Bioinformatics." *Sociology of Science Yearbook* 19 (1999): 49-87.

³⁶ In the 1950s and 60s adoptive children were told they were chosen children, and experts advised adoptive parents to use this narrative. The trope of the chosen family is also used within lgbtq communities.

Cystic fibrosis, Tay-Sachs, hemophilia, Down Syndrome. *Okay*. Eye and hair colour, height, sex, athletic ability. *No way*. These, for the time being at least, are the boundaries Canadians have placed on the use of a controversial genetic screening process that some fear opens the door to designer babies, and which the Catholic church decries as an ‘inherent evil.’³⁷

Within the article Canadian bio-ethicist Gregor Wolbring is quoted, warning: “Once you’ve started disease selection, you’ve started down the road to commodification of your children.”³⁸ I have tried to show that concerns about the commodification and marketing of children are not new. Similar concerns were behind efforts to regulate and standardize child welfare and adoption practices at the turn of the 20th century, giving rise to the Western conception of the universal child in need of protection. Moreover, social workers contributed to the popularization and transfiguration of genetics and psychology, through scientific adoption practice, and helped to usher in a cultural shift: the “right” to expect a healthy child.

My examination of social workers’ efforts to rationalize adoption demonstrates that translations do not only come from experts, and managerial efforts often fail. Emily Martin suggests that “in complex historical circumstances, both scientists and nonscientists are forging ways of acting, being and thinking in the world, or in other words, forging what anthropologists call cultures.”³⁹ As Bowler and Rapp have shown, scientific theories are never strong enough on their own to either succeed or displace folk understandings of heredity. The social conditions

³⁷ Toronto Star, June 2006: D1 [*emphasis added*]

³⁸ Ibid., D4.

³⁹ Emily Martin, “Anthropology and the Cultural Study of Science: Citadels, Rhizomes and String Figures,” *Science Technology and Human Values* 23, no. 1 (1998): 28.

have to be “ripe” for the reception of facts and science is interpreted in wider contexts. Ideas about bodily or physical perfection never entirely disappear.⁴⁰ Scientific descriptions of inheritance do not always fit together with the ways parents make meaning of inheritance and there are differences in the ways that “relatedness” is understood and translated.⁴¹

Contemporary social work scholars agree we can no longer be naïve about the impact of benevolence and the history of helping professions. The competing narratives of “kidnap and rescue” framed early adoption efforts just as they continue to frame public adoption controversies.⁴² There are striking parallels between current concerns about the state of adoption practice and postwar debates about the need to shore up the adoption system to deal with social problems of the welfare state. Transformations to the adoption system remain entangled in debates about public versus private responsibility for children, the jurisdictional boundaries between professions, and what kinds of interventions into family life and community structures can legitimately be defended in a liberal democratic state.

My case study provides a further contribution to historical sociological accounts that challenged the evolutionary nature of the welfare state.⁴³ One of the dominant themes in the history of adoption is that the humanism, pluralism and liberalism of the immediate postwar years paved the way for nurture discourse to

⁴⁰ Rayna Rapp, “Heredity, or: Revising the Facts of Life,” in *Naturalizing Power: Essays in Feminist Cultural Analysis*, eds., Sylvia Yanagisako and Carol Delaney (New York, Routledge: 1995), 70; Peter J. Bowler, *The Mendelian Revolution: The Emergence of Hereditarian Concepts in Modern Science and Society* (Baltimore: The John Hopkins University Press, 1989).

⁴¹ Rapp, “Heredity, or: Revising the Facts of Life,” 70.

⁴² Karen Dubinsky, “Babies Without Borders: Rescue, Kidnap, and the Symbolic Child,” *Journal of Women's History* 19, no.1 (2007): 142-150.

⁴³ Maurutto, *Governing Charities*.

triumph over nature, a shift described as the power of environmentalism over eugenics (or deterministic hereditarianism). While psychological and psychiatric discourses associated with nurture were instrumental to the emerging therapeutic state, medical genetics was also quietly gaining a foothold through the concept of genetic disease. Rather than nurture discourse replacing nature, social workers helped to circulate, reify, and breathe new life into the nature-nurture debate, a cultural resource and the controversy that never dies:

By the time you had tracked down why people are like that – heredity or environment (the classic argument), mischance, misfortune, incompetence, etc. and then begun working to get a law passed - - law? it would be more like a whole constitution – you would probably be near death or in any case just an old foggy utterly disregarded by a new lot of people with a new idea of what should be done andwell, just figure it out for yourself. Anyway, the answer is the reason why we help the children the way we do. Of course it isn't perfect – are you quite satisfied about the way you are bringing up yours? – but it does bring about 40,000 who lack the essentials for health, happiness and future good citizenship through our hands in Ontario every year.

"Did you say 40.000? It's a crime! Something should be done about it." We're doing it, the best and quickest way we can – *while they're children*. If people can devise a means for ridding the world of the need for Children's Aid – which really means *ridding it of all the weakness, sin, imperfections and accidents* that operate in human life. – let them see to it with a will. The job of Children's Aid is to give the children their chance *when they need it!*⁴⁴

⁴⁴ Henderson, "Your' Children's Aid Society" 1 (1947): 2-3. [emphasis added]

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ARCHIVAL SOURCES

Archives of Ontario, Toronto

Ministry of Community and Social Service Records
Ontario Association of Children's Aid Societies fonds

Metropolitan Toronto Archives and Records, Toronto

Children's Aid Society and Infants' Homes fonds
Infants' Homes of Toronto fonds

Magazines

Chatelaine
Harpers
MacLean's Magazine
New Yorker Magazine
Saturday Night

Newspapers

Fergus News Record
Globe and Mail
Guelph Mercury
Halifax Herald
Montreal Gazette
Montreal Herald
Star Weekly
Toronto Star
Vancouver Herald

LIST OF ABBREVIATIONS

AO	Archives of Ontario
CAS	Children's Aid Society
CWC	Canadian Welfare Council
CWLA	Child Welfare League of America
MTA	Metropolitan Toronto Archives (City of Toronto Archives)
OACAS	Ontario Association of Children's Aid Societies
TWC	Toronto Welfare Council
USCB	United States Children's Bureau

APPENDIX A

Religion of Children who were Permanent Wards

Religion	Children	Per cent
Protestant	464	57
Roman Catholic	344	42
Jewish	4	<.5
Greek Orthodox	2	>.5
	814	100

Source: Harold Treen et al, "Study of Permanent Wards of 55 Children's Aid Societies in the Province of Ontario," Minister's Committee on Child Welfare, 1963.

Sex of Children who were Permanent Wards

Sex	Children	Per cent
Male	452	56
Female	362	44
	814	100

Source: Harold Treen et al, "Study of Permanent Wards of 55 Children's Aid Societies in the Province of Ontario," Minister's Committee on Child Welfare, 1963.

Racial Background of Children who were Permanent Wards

Racial Background	Children	Per cent
Caucasian	712	88
Indian	36	4
Part Indian	32	4
Part Negro	16	2
Negro	10	1
Oriental and Partly Oriental	7	.8
Part West Indian	1	.2
	814	100

Source: Harold Treen et al, "Study of Permanent Wards of 55 Children's Aid Societies in the Province of Ontario," Minister's Committee on Child Welfare, 1963.

Intelligence Testing Scores for Children who were Permanent Wards*

IQ Result	Children	Per cent
IQ below 70	59	12
IQ between 70-79	68	14
IQ between 80-89	102	21
IQ between 90-99	160	34
IQ between 100	89	19
	478	100

Source: Harold Treen et al, "Study of Permanent Wards of 55 Children's Aid Societies in the Province of Ontario," Minister's Committee on Child Welfare, 1963.

*IQ Testing Scores were only given for 478, or 59% of the 814 children, who had testing.

Measurement of school progress for Children who were Permanent Wards

Schooling	Children	Per cent
Backward in School or in Special Class	291	36
Average Progress in School	254	31
Above Average Progress	26	3
Under School Age or Not Recorded	243	30
	814	100

Source: Harold Treen et al, "Study of Permanent Wards of 55 Children's Aid Societies in the Province of Ontario," Minister's Committee on Child Welfare, 1963.