“Financially irresponsible and obviously neurotic need not apply”: Social Work, Parental Fitness, and the Production of Adoptive Families in Ontario, 1940–1965

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A discourse on adoption emerged between 1948 and 1965 in which the fitness of parents was given primary emphasis and was measured by new tools of psychological assessment. The postwar years were characterized by new attention to mental health and a revitalized family imperative. Social workers fought to establish their own authority over adoption practices, against the private, “grey market” arrangements made by doctors and lawyers. Social workers attempted to do this in two ways: by shoring up responsibility for the “home visit”, the technique by which they could assess “proper” motivations and fitness of parents; and by linking the fitness of parents to the postwar project of nation-building. The plight of “unadoptable” children presented a public challenge to the discretionary, regulated practices established by social workers, however, and they redoubled their efforts to find homes for hard-to-place children. In the process they contributed to the creation and maintenance of particular visions of Canadian identity and otherness.


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IN 1953 a scandal that hit the front page of the *Toronto Star* served as a lightning rod for debates over agency versus private adoptions. Suggesting exorbitant profits were being made by those selling Canadian children, the headline read, “MAY BE 100 BABIES BOUGHT AT $250 IN CITY BRING $1000 IN U.S.”¹ The story revealed that on February 20, at the Toronto airport, the police had arrested a 29–year-old Brooklyn couple who had possession of a four-day-old baby boy and a false birth certificate. The police morality squad, working with the RCMP and FBI, claimed to have uncovered a baby-smuggling ring that had transported at least 100 babies across the United States/Canada border within the previous year. Descriptions of the couple and their arrest evoked images of shady foreigners snatching helpless Canadian infants: “Mrs. Shinder, a pudgy-faced brunette ... swung around when cameramen took her picture.”² “Her husband, sharp-faced swarthy-complexioned, wore a blue-station wagon coat … [and] shielded his face with the broad fur collar.”³ Reactions to their arrest were mixed. Some “sym pathetic strangers” asked if they could help, but the Shinders also received a phone call threatening them for stealing Canadian babies and a “viciously Anti-Semitic letter”.⁴

The paper linked their arrest with other “baby rackets” exposed by police in New Brunswick and Quebec the same year.⁵ The police appealed to the wider public, stating that this case affected everyone, as “black markets” made it difficult for anyone to get a baby because healthy infants fetched such a high price in the United States.⁶ Yet, as the story unfolded, it became clear that the Shinders were in fact merely proceeding as many other couples had done in pursuing a private adoption. Arrangements had been made with the baby’s mother through a Toronto doctor. Introduced to the Shinders by mutual friends, the doctor had visited their “very ordinary” three-room Brooklyn home to see “what a nice place they had”.⁷ Indeed, the police had not discov-

² Ibid. p. 2.
³ Ibid.
⁵ The anti-Semitism described in the Shinder case appears to be connected with these earlier arrests. A 1952 front-page story mentions that this baby ring of well-known Montreal doctors and lawyers had placed 400 babies with Jewish parents, mainly in the United States, despite only four illegitimate births having been reported by Jewish girls during the same year (“Alleged Chief of ‘Baby Ring’ Surrenders”, *Montreal Herald*, February 15, 1952). “Police say the ring sold hundreds of babies to wealthy couples at prices ranging between $3000 and $4000” (see “$1 Million Baby Farm Ring Broken”, *Montreal Gazette*, February 6, 1952).
⁷ Sangster, “Should Edith Shinder Get Her Baby?”
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erred the Shinders. Rather, they turned themselves in to the police when an airport immigration officer learned that Mrs. Shinder, a Russian-Jewish immigrant, did not have proof of her American citizenship. The next day the paper captured the arrest of the doctor with a headline reading, “Toronto Police Suspect Baby-Smuggling Ring”.8 The police said they would have to establish whether the couple had been “ill-advised” or whether they were acting as “couriers”.9 Although the police admitted it was possible that the mother had signed the baby over to the couple, they maintained that this practice was nonetheless illegal as the Children’s Aid Society was the only entity that could place children.10 The couple explained that they had avoided an agency adoption because they had been told by friends that they would be rejected as a result of their financial and Jewish status, as so few Jewish babies were available.11 In addition, they could ill afford the $500 fee American agencies charged.

According to Dorothy Sangster, writing for Maclean’s Magazine, this was one of the “most publicized and highly controversial cases on record, [and] the verdict one of the hardest for any judge to hand down”.12 Testimonials offered by Edith Shinder’s relatives and friends emphasized they had never seen “another girl with such a mothering instinct”.13 The “natural” mother had consented to the adoption, and a doctor had brokered the arrangement. To the CAS, however, the Shinder case defied every tenet of what social workers had deemed to be scientific adoption procedure.14 Committed to “matching” children and adoptive parents, social workers criticized the Shinder case because the natural mother was still concerned with her baby’s welfare, the baby’s physical and mental development had not been evaluated, a home visit and the one-year residency requirement of the CAS were not possible, and finally it had never been established that the Shinders were fit parents and whether they and this particular baby were well matched.15

In the period following World War II, social workers attempted to standardize and systematize adoption practice and, in the process, to constitute

9 Ibid.
10 Owen Spettigue, An Historical Review of Ontario Legislation on Child Welfare (Toronto: Ontario Department of Public Welfare, 1956). In conjunction with the Children of Unmarried Parents Act, passed in 1921, the CAS was to make investigations on behalf of the provincial officer. The exchange of money for children (the black market) was made illegal with the introduction of the Adoption Act, also passed in 1921. In the 1970s provincially licensed child placement officers as well as social workers at the CAS could undertake home visits for the court.
11 Sangster, “Should Edith Shinder Get Her Baby?”
12 Ibid., p. 23. I was unable to locate the verdict for this case, after searching through periodicals and newspaper articles for the months that followed the Shinders’ arrest and application for adoption.
14 Ibid., p. 69. The terms “natural” mother and “natural” parents are retained to convey the language of the period.
15 Ibid. This case potentially served as a catalyst for the revised Child Welfare Act of 1955, which consolidated the change in discourse towards children’s rights and protection.
their own professional legitimacy. They did this in two ways: by emphasizing and shoring up responsibility for the “home visit”, arguably the technique by which they could assess the fitness of parents; and by linking the new concern over the fitness of adoptive parents and over the kinds of environments in which adoptable children would be raised to the postwar project of nation-building. Social anxieties over definitions of the normative family were expressed in an emerging discourse in which the fitness of adoptive parents was emphasized and measured by social workers, who borrowed knowledge and expertise from the newer fields of psychology, psychoanalysis, and social science. At the same time as social workers enrolled expertise of other professionals and translated the language of psychology and social science, they also sought to carve out the boundaries and borders of their own professional domain.

The Shinder case is also suggestive of postwar anxiety over the boundaries of nation and kin. Cross-border adoptions exposed a potentially porous boundary through which certain bodies — conceived of as part of the imagined community of Canadians — were disappearing, while the immigration of those defined as “others”, with their dangerous cultural traditions, was increasing. For example, Eastern European immigrants from behind the Iron Curtain were seen to embody “un-Canadian” norms; they were pathologized as being “psychologically dangerous”, as not understanding democratic citizenship, and as expecting the state to be responsible for them.16

Barbara Melosh suggests that adoption raised fears of boundary-crossing in ways that biological families did not. Adoption violated assumed expectations of kinship, in that socially and intentionally formed adoptive families could be more “heterogeneous” rather than having the assumed sameness of bio-families. These adoptive families were, in Melosh’s words, “potent sites[s] for expression of [national] visions of identity and otherness”,17 but therefore they were also potent sites for the expression of difference and dissent. In crossing the boundaries of both nation and kin, the Shinder case provides an opening for thinking about how the composition of adoptive families was infused with the unfinished project of creating and maintaining Canadian visions of identity and otherness.18 It also provides a starting point for discussing how social workers inserted themselves in the process of redefining national, familial, and professional borders.

To trace the process whereby social workers systematized public adoption practice in Ontario in the period from the 1940s into the 1960s, I draw on a range of primary sources. I rely on a small sample of case files from one mid-

sized Ontario CAS,\textsuperscript{19} relayed as non-identifying information from Sharon Peters, a social worker in the field of adoption and reform for almost three decades.\textsuperscript{20} The rules of confidentiality in the CAS did not allow me to have direct access to case files, and Peters read the files to me at the same time as she offered her oral testimony.\textsuperscript{21} In addition, I consulted a selection of data collected from the Archives of Ontario, as well as the Metropolitan Toronto CAS archives,\textsuperscript{22} newspaper articles, and government documents.\textsuperscript{23} I also draw upon of a selection of professional articles from Canadian Welfare, the journal produced by the Canadian Welfare Council, and The Social Worker, both of which were geared to the profession of social work, as well as popular articles from the three most widely read Canadian magazines: Chatelaine, Maclean’s, and Saturday Night.

The postwar context was characterized by increased attention to mental or psychological health — the emergence of what Laura Epstein has called the rise of the “therapeutic state”.\textsuperscript{24} In this context, social workers emerged as the key players in a state-legislated and CAS-administered public adoption system that constituted adoption practice as scientific. Further shifts occurred in the 1960s, when the issue of “hard to place” — mainly racialized — children threatened the stability of boundaries that social workers had drawn for themselves in the adoption process.

\textsuperscript{19} Even the small number of files (18) to which I had access challenged narratives of social work history in which objectivity, impartiality, and formal scientific practices replaced earlier more moralistic accounts, as shown in the work of Margaret Little, No Car, No Radio, No Liquor Permit: The Moral Regulation of Single Mothers in Ontario, 1920–1997 (Toronto: Oxford University Press, 1998); Paula Maurutto, “Governing Charities: Church and State in Toronto’s Catholic Archdiocese, 1850–1950” (PhD thesis, York University, 1998).

\textsuperscript{20} Sharon Peters is a pseudonym, as is the “Easton CAS” for which she worked. The sample includes confidential, non-identifying information obtained from nine hours of interviews conducted in July and August 1995. Composite characters were created to avoid any similarity with individual histories. Peters had been a caseworker for almost 30 years and was Director of Adoption Disclosure at the time of this research.

\textsuperscript{21} This oral history data made explicit those processes evident, though sometimes not specifically explained, in the textual sources. Peters provided reflective commentary, clarified terms, interpreted the professional language used, and offered “insider” impressions of earlier processes. For a vigorous defence of the use of oral testimony, see Franca Iacovetta, “Post-Modern Ethnography, Historical Materialism, and Decentering the (Male) Authorial Voice: A Feminist Conversation”, Histoire sociale/Social History, vol. 32, no. 64 (1999), pp. 275–293; Karen Flynn, “Experience and Identity: Black Immigrant Nurses to Canada, 1950–1980”, in Marlene Epp, Franca Iacovetta, and Frances Swyripa, eds., Sisters or Strangers? Immigrant, Ethnic, and Racialized Women in Canadian History (Toronto: University of Toronto Press, 2004). Some of the limits of the generalizability of this approach stem from reliance on recollection and recounting the past in light of contested meanings of that past and how one positions oneself in it. Despite this limitation, Peters provides insights as one of a core group of feminist-identified social workers involved in adoption reform in Ontario, whose observations have not been well documented.

\textsuperscript{22} Archives of Ontario, RG 29 Files; City of Toronto Archives, CAS Fonds 1001.

\textsuperscript{23} For example, this includes registrar general reports and child welfare department documents.

Postwar Anxiety and the Rise of Psychology

In the 1950s major shifts in the organization of gender and sexuality were taking place as a way of displacing fears of social instability produced by war. During the war years more women than ever before had been encouraged to enter the labour force as part of their national duty. Anxieties about men returning from overseas and older memories of the Depression led to attempts to push women back into the home. Desertion remained a problem as servicemen had difficulties trying to adjust to normal family life.25 As the meaning of women’s work changed, parallel debates emerged about “loosened” morality and a growing concern over an alleged rise in illegitimate pregnancy. Margaret Little has shown that social agencies participated in manufacturing this moral panic about the fallibility of the nuclear family.26 The idioms of health and disease were linked with war, nation, and family life, and welfare officials and social workers were called upon to intervene.27 One supervisor of the oldest CAS in Ontario, appalled at the “lack of adherence to a minimum standard of decency”, argued there had always been desertion and immorality, but worse now was the increase in common-law unions and working mothers.28 After World War II, individualistic psychological explanations began to appear more frequently with respect to a wide range of “non-conforming” sexual behaviour such as that displayed by unwed mothers and homosexuals,29 but increasingly including that of childless couples.30

Mona Gleason shows how the expanding profession of psychology in Canada established expertise in determining “normality” for “ordinary” Canadi-
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ans through the child-centred focus of the postwar period, as seen in the “foothold” that psychology gained in schools and social welfare institutions. The normal family idealized in psychological discourse “entrenched and reproduced the dominance of Anglo/Celtic (as opposed to ‘ethnic’) middle-class, heterosexual, and patriarchal values”, and all others were described as “poorly adjusted”. As immigration patterns shifted, various helping professions took on the added “process of Canadianization”, 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. The prescription advanced by psychology was that Canadians had to develop normal personalities, and parents and teachers were instructed in how to cultivate this in children to avoid the risk of producing “mentally unhygienic future citizens”.

Psychologists were not alone, however. The desire to shape the family came from an “army of human relations experts, including sociologists, social workers, and marriage counsellors”, all offering to help Canadians cope with change in the 1950s. As Laura Epstein has argued, “personalities, feelings, and lifestyles” became “primary targets of intervention” within social work, and social workers gradually gave up on poverty in favour of personality, as psyches were thought to be more malleable than a wage structure.

Nikolas Rose has described this postwar process as one whereby a discourse of mental health became a public health issue, providing the basis for new programmes in education and prevention. The growth of psychiatric expertise moved beyond those “inside the asylum”, transforming how everyone understood his or her own existence. Rose argues that a “new field of social and personal life was rendered visible, calculable and governable”, leaving no phase of life untouched. Rather than seeing psychiatry as a form of social control that spread in opposition to more humanistic models of community health, Rose describes it as an expanding “free market in expertise”.

Going beyond the familiar theme of “professional monopolization”, Rose argues that a “proliferation of experts” emerged as new specializations of expertise opened up to investigate and delineate more spaces of social exist-

31 Gleason Normalizing the Ideal, pp. 5–6.
33 Gleason, Normalizing the Ideal, p. 7.
34 Ibid., p. 17.
35 Ibid.
36 Epstein, “The Therapeutic Idea”.
38 Ibid., p. 53.
39 Ibid., p. 43.
40 Ibid., p. 84.
ence. One feature of his analysis is the shift to a history of problematizations, in which we ask what conditions made the formation of problems possible and “amenable to management by expertise”, rather than simply assuming the self-interested investment of professionals.\textsuperscript{41} Second is that monopolization is replaced with the “generosity of expertise”. In this case psychology’s and psychiatry’s “vocabularies of expression, procedures of judgement and techniques of remediation” were lent “‘freely’ to others — probation officers, social workers, teachers, managers, nurses, parents, individuals”.\textsuperscript{42} Personal responsibility for one’s own happiness became a national objective because it was supposed to result in greater social efficiency.\textsuperscript{43} Rose’s analysis provides one way to follow how the translation of “psy” knowledges by social workers enabled them to offer new services to childless couples.\textsuperscript{44}

**Turf Wars**

**Medicine and Social Work**

Professional interest in managing adoption, motherhood, and family formation was not new. Anna Davin shows how in the late nineteenth century the links between British imperialism and “racial motherhood” provided rationalizations for increased state intervention in the development of public health and compulsory education movements.\textsuperscript{45} Canadian scholars like Cynthia Comacchio have documented how social workers and doctors in the first half of the twentieth century sought to regulate populations deemed too fertile (such as the working class and immigrants).\textsuperscript{46} The ascendancy of medical expertise and promotion of “scientific motherhood” in the 1920s and 1930s, as doctors attempted to manage all stages of pregnancy and child health, involved strategies for prevention and education aimed at mothers. From the 1930s into the postwar period the education of mothers and teachers was key to the expanding field of psychology, dominated by white, European men.

State officials were equally concerned about the plight of Canadian children. In 1893 the Children’s Aid Society was authorized by the Ontario gov-


\textsuperscript{42} Ibid.

\textsuperscript{43} Rose, “Psychiatry: The Discipline of Mental Health”, p. 52.

\textsuperscript{44} Rose, “Expertise and the Government of Conduct”, p. 390. The term “psy” knowledges, suggested by Rose and others, refers to psychiatry, psychology, psychoanalysis, and the range of practices and technologies/therapies associated with them.


government to intervene in cases of perceived neglect or cruelty toward children. For the next 40 years, this privately run organization received greater and greater legislative authority to act on behalf of the Ontario government in managing the province’s “public” adoption system. The state was answerable for the child’s legal status, but the CAS was responsible for implementing the legislation. In the 1930s a Department of Welfare brought under one administrative umbrella oversight of Children’s Aid Societies, children’s institutions, adoptions, and work with unmarried parents. The new welfare minister fought for a better budget for his portfolio, but at the same time demanded of the CAS “greater accountability and increased professional training for child welfare workers”. Scientific welfare carried out by government-regulated agencies was something Charlotte Whitton, social worker and founding director of the Canadian Welfare Council, had long advocated. The most public example of the growing role of the province in child protection was the 1934 case of the Dionne quintuplets, who were separated from their family and put on display as Ontario’s largest tourist attraction.

Although the CAS was becoming increasingly important in the adoption field, “grey market” private adoptions arranged by doctors and lawyers as well as illegal “black market” arrangements in which money was exchanged for children persisted during the interwar and postwar eras. Thus the postwar debate over agency versus private adoptions — played out in the media coverage of the Shinder case — provided a new opportunity for examining the professional boundaries of medicine, psychiatry, psychology, religious and legal orders, and the newer field of social work (which was dominated by women).

Social work has been “perennially involved in defining and redefining itself” and justifying its work: this included its particular niche, knowledge base, practices, objects of intervention, and identity. As part of this redefi-

47 Martyn Kendrick, Nobody’s Children: The Foster Care Crisis in Canada (Toronto: Macmillan, 1990), p. 79.
51 McCullagh, A Legacy of Caring; Kari Dehli, “Fictions of the Scientific Imagination: Researching the Dionne Quintuplets”, Journal of Canadian Studies, vol. 29, no. 4 (1994), p. 86. Dehli argues that psychologists and nurses who were part of Dr. William Blatz’s research team “constrasted the categories that they claimed to discover in children”.
52 See, for example, Comacchio, Nations are Built of Babies; Gail Wills, A Marriage of Convenience: Business and Social Work in Toronto, 1918–1957 (Toronto: University of Toronto Press, 1995).
nition and struggle for credibility in the postwar period, social workers borrowed from psychology, psychoanalysis, and social science to strengthen their own networks, in turn providing an additional space of circulation for this expanding knowledge. The mainly female social workers in the Ontario Children’s Aid Societies attempted to establish themselves as the “obligatory point of passage” through which all couples would have to pass to achieve their goal of a successful adoption. Social workers publicized the dangers of unsupervised — mainly private — adoptions in particular ways, offering their own form of expertise to parents and the wider community and trying to enrol doctors, lawyers, and adoptive parents in the agency process.

Adoption was offered as a two-pronged solution to new problematizations of infertility and illegitimacy, and it had the potential to disrupt the relation between doctor and mother. When children were relinquished through the agency process, social workers in a sense became surrogate mothers, creating new possibilities for autonomy and expertise. The CAS took responsibility for all temporary wards of the state, many of whom would eventually be adopted. But from the outset there were struggles over inadequate funding, autonomy, and accountability.

In the professional social work discourse of adoption after World War II, the needs of the expanding society were increasingly defined in unison with those of the baby: the clarion call known as the “best interests of the child”. With the postwar attention to psychological health, geared as it was toward the “child” in society, mothers and children became subject to a battery of tests intended to predict the likelihood of their normal development. Dr. Eleanor Long, a child psychologist who worked for the Mental Hygiene Clinic at the Toronto CAS, declared that “the studies we conduct of the children in our care aid in assessing their mental and personality development”, which in turn helped in finding homes for children. The busiest clinic in Canada, the society tested all children coming into its care, some as early as five weeks old: “With a two-month old child one of the tests used is whether it can smile [normally].” But the new knowledge of psychology was not...
simply directed at unwed mothers; it provided new concepts for understanding and regulating infertile or childless couples.

The sticky problems of infertility and illegitimacy were evidence to professionals that the maternal instinct could not be left solely in the hands of mothers. The regulation of women’s sexuality became connected to safeguarding the nation, and a legion of social workers took on the task. Healthy babies were not just products to which mothers could dedicate themselves to nurturing 24 hours a day; they were also future citizens. Hence social workers needed to ensure that the right kind of national family units were created.60 Anxieties about the threat of race degeneration and the swamping of the nation by those with poor constitutions were promulgated in the 1930s and 1940s, supporting a range of eugenic strategies.61 The postwar revelations of European fascism made it unacceptable to refer explicitly to “undesirables”, however, while attention toward the infertile and childless could be depicted as a positive nation-building effort.62

“Safety” in Adoption: CAS versus Private Adoption
In Ontario in the 1950s, efforts to educate adoptive parents were stepped up in an effort to persuade them that “finding a good home” for baby should be carried out by the semi-private but state-regulated Children’s Aid Societies, run by professionally trained social workers.63 The dominance of hereditarian thought in the 1930s had previously prevented many potential couples from adopting a “stranger” into the family, but the rise of psychological explanations emphasized environmental upbringing over genetic makeup, recasting adoption as a more acceptable way to form a family. Also, unwed pregnancy (if the mother was white) no longer tainted the child with the mother’s mistake, which was now identified as evidence of maternal pathology.64

Still, fears about bad blood did not disappear completely. In the early 1940s social agencies (such as the CAS) staffed with social workers had to

60 An example of social work efforts after World War II can be seen in a pamphlet given to parents. The chapter called “Adoption Procedure” describes reasons for rejecting an adoptive couple, one being, “the would-be adoptive mother was too busy with outside interests to give the child adequate care”. Archives of Ontario, RG 29 Files, “The Citizen of Tomorrow” (OACAS pamphlet, 1946), p. 29.
61 MacLaren, Our Own Master Race. These are described as both “positive” and “negative” forms: in other words, promotion versus prevention of births.
62 Mackey (The House of Difference), for example, refers to the postwar United Nations declaration that nations could no longer refer to “stock”.
prove their expertise and interpret this to the public. They advertised their services to prospective couples in newspapers and popular magazines, stating that their procedures were superior to private adoption services because they provided protection from the questionable heritage of the child. They claimed uncertainty could be avoided through an agency adoption, in which detailed information would be taken about the mother’s background: “The protection offered to the adopting parents also saves them from taking responsibility for children about whose heredity or physical and mental capacity they know nothing.”

In 1949 the *Star Weekly* published an article by journalist Marjorie Earl, characterizing the growing acceptability of adoption as a way for “modern” young couples to form a family. Earl described it as “an exact social science ... whereby 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 than this, they can be sure their new family life will be carefully protected.”

Three years later, in *Saturday Night*, another reporter, Ruth Spielberg, described the “mushrooming” of adoption in Canada as a result of greater confidence in adoption practices. Although there was nothing to compel parents to proceed through social agencies, and up to half of all adoptions in Ontario were private placements, social workers tried to educate the public and doctors alike by offering tragic tales of failed adoptions. For example, the pitfalls of private adoption were “driven home” by one doctor enrolled by social workers who claimed that family physicians were often approached by couples wanting to adopt a baby, but usually they had not “given serious thought to heredity and inherited weakness”. Admitting that most doctors did know of babies available for adoption, he warned readers that, when the private route was taken, “should something develop in a child in a month or a year, the parents have to assume complete responsibility”.

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65 The gendered nature of the profession (social workers and clients) is not the focus here; for work that chronicles the “scientization” of social work and the increased position of male authority within social work departments in universities, as well as in administrative positions, see Carol Baines, “The Professions and an Ethic of Care”, in Carol Baines, Patricia Evans, and Sheila Neysmith, eds., *Women’s Caring: Feminist Perspectives on Social Welfare* (Toronto: McClelland & Stewart, 1993); Ken Moffat, *A Poetics of Social Work: Personal Agency and Social Transformation in Canada, 1920–1939* (Toronto: University of Toronto Press, 2001).

66 Marjorie Earl, “Adoptions Soar in Canada”, *Star Weekly*, January 8, 1949, p. 2. Also, the infamous case of the Ideal Maternity Home in Nova Scotia (the Butterbox Babies) during the 1940s provided a scandalous example of other provincial governments and social workers to use in their push towards state intervention in private adoption practices.


70 Archives of Ontario, OACAS, W. R. Webster, MD, “Child Adoption”, *Foundations First* (Simcoe County Children’s Aid Society, July 1948).

71 Ibid.
An additional danger was revealed in 1950 when the Ontario Court of Appeal ordered that an infant be returned to the birth mother before the adoption had been finalized. The case caused a great deal of interest and commentary in the media and among social workers. For the editors of *Canadian Welfare*, the problem in the 1950 case was that the adoption had been arranged privately. The CAS claimed that only social workers could guarantee freedom from interference by the natural parents, long after the child had settled into the adoptive home. On top of this, a good social worker was also supposed to be able to spot an unfit adoptive mother in one interview.

**The Science of Adoption: Measuring Fitness**

The growing movement for agency over private adoptions highlighted the problem of the status of social workers in the community, demanding that adoption practices be uniform, at least on the surface. From the outset, social workers tended to focus on meeting the needs of adoptive parents, but increasing pressures due to social, political, and economic trends in the post-war period meant they had to respond to the new focus on children’s rights. By the mid-1950s, with the 1954 *Child Welfare Act*, the goals of adoption within child welfare services had reversed; the child was recast as the client, and workers emphasized that they sought “homes for children, never children for homes”. Policy-makers switched their primary objectives from providing infertile couples with untarnished babies to meeting the emotional and psychological needs of parentless children. As one social worker wrote, “The demand for children for adoption grew, and the Children’s Aid Societies for the first time found themselves with more applicants for adoption than children. Consequently, agencies became more demanding in their expectations of what constituted a good adoptive parent.”

Agency practices appeared to be market-driven, as a competitive market opened up for healthy, white babies, and couples increasingly had to prove their worthiness as possible parents to social workers, who had secured a legal role as go-between in this transaction. Assessment through the home visit became part of a new self-conscious protocol that paved the way for public

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73 Ibid., p. 4.
74 The legalization of practices of secrecy in adoptions and the implementation of probationary periods for birth mothers and adoptive parents were both examples of these efforts.
76 Walker, “Is Our System of Child Adoption Good Enough?”; see also Archives of Ontario, RG 29 Files.
77 There were ongoing relevant legal debates over making children permanent wards more quickly and easily to release them (from their natural parents) for adoption. See Philip Hepworth, *Foster Care and Adoption in Canada* (Ottawa: Canadian Council on Social Development, 1980).
agencies such as Ontario’s Children’s Aid Societies to argue that only they were best suited to the task of safe, scientific, modern adoption placement.

**Infertility and Medical Contributions to Fitness Assessment**

As adoption was increasingly promoted as a solution to the problem of infertility, enabling couples to “demonstrate their wholeness as a family” by having children, one of the first measures of fitness for some couples was to produce a doctor’s testimony proving that they were infertile. In 1953 a group of doctors organized the Canadian Society for the Study of Fertility, the chief aim of which was to undertake research in the area of reproduction. The medical profession had divided childless couples into three general categories: the voluntary childless, who it was believed wanted to be free to pursue a career, travel, or a “glittering social life”, couples who had some type of [legitimate] physical deterrent that might be corrected with surgery or artificial insemination, and those who showed no sign of physical “defect” but were still unable to conceive. This latter category especially interested psychiatrists, who speculated that factors such as “tension, guilt, conflict, self-hate, subconscious resentment and immature attitudes played a role in some of these cases”. Evoking earlier arguments about degeneracy, journalist Dorothy Sangster also speculated that perhaps nature herself had reserved the gift of fertility for healthy parents.

Some psychiatrists saw infertility as a defence against motherhood, revealing the prevalence of psychiatric disorders directed at women. They drew on an older discourse of mother-blaming that held women responsible for their own infertility. Before male infertility was established, women were blamed entirely, and the circulation of psychological expertise after 1945 provided new explanations that equated female maturation with having children. Elaine Tyler May describes how medical experts in the new field of

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79 Garber, _Disclosure of Adoption Information_, p. 12.
80 Walker, “Is Our System of Child Adoption Good Enough?”, p. 73.
81 Dorothy Sangster, “The Brightening Outlook for Childless Couples”, _Macleans_, vol. 73, no. 22 (October 22, 1960), p. 28. The above statement appears to be directed at women who worked or wanted a career; the “glitter” invoked moral overtones of irresponsibility and superficial attention and fame.
82 I use the term “artificial” versus “alternative insemination” because of its use at the time.
84 Ibid.
85 For further writing on the historical concept of degeneration, see S. Gillman and J. E. Chamberlain, eds., _Degeneration: The Dark Side of Progress_ (New York: Columbia University Press, 1985). The concept of degeneration provides a line of enquiry that draws upon earlier evolutionary theories suggesting that infertility might be the outcome of a process whereby those with weak constitutions should not reproduce.
86 Sangster, “The Brightening Outlook”.
infertility looked to psychology to explain the 50 per cent of cases that “eluded” physiological explanation. Women were blamed for causing their own infertility if they worked outside the home or engaged in other forms of “unfeminine” activities. The stress of work on men was unthinkable at a time when attempts to reinvigorate the ideology of separate spheres took hold. When treatments proved unsuccessful in many cases, some experts at the extreme end of the debate drew on psychological and psychoanalytic theories to argue that women might appear eager but were unconsciously “thwarting” motherhood. An example from one article in the *Journal of the American Medical Association* penned by three men (a sociologist, psychologist, and gynaecologist) described women who rejected femininity: “Women totally lacking the desire for children are so rare that they may be considered as deviants from the normal.” Though many gynaecologists were apparently reluctant to take the explanations that far, Sangster’s article in *Maclean’s* cited one doctor who recalled meeting a woman in his office who he said suffered from the ills of “modern materialism.” After she told him she had purchased new furniture, revealing the financial strain this had produced, his advice was “to stop buying things, go to church more often, and spend more time with her sick mother.” Infertile women required expert assistance, and possibly their doctor’s blessing, to help them reach appropriate womanhood.

The romance with psychology and Freudian theories featured with greater frequency in a variety of domains; jargon appeared in popular and professional or scientific magazines as well as “casual conversations”. The use of psychological explanations for female infertility also presented a paradox for those who regulated adoption practices. One doctor writing in the medical journal *Pediatrics* wondered whether an infertile woman, whose condition had been diagnosed as a defence against motherhood, was really good enough as an adoptive parent. On the other hand, he knew that if couples were rejected because of such professional judgements they might proceed through private adoption channels anyway. He admitted that doctors knew very little about the right emotional climate for children and had little control over “natural” families who did not come through their doors.

89 May, “Nonmothers as Bad Mothers”, p. 203.
90 Sangster, “The Brightening Outlook”.
91 *Ibid.* (Dr. Arronet was the director of one of the busiest infertility clinics in Montreal, an indication that his opinion would hold some power or authority.)
93 Julius B. Richmond, MD, “Some Psychological Considerations in Adoption Practice”, *Pediatrics: Official Publication of the American Academy of Pediatrics*, vol. 20 (1957), proceedings from a Panel Discussion of Adoption held in 1956, which included individuals involved in adoption in various professional capacities.
Given these medical and psychiatric insecurities and debates, including professional and lay uncertainty about the origins of infertility, social workers were well positioned to play a key role in managing adoptive practices. They provided secrecy to create the illusion of normalcy in the adoptive family’s home. The language of professionals, as well as the law, reinforced the myth of the child “as if born to” the adoptive parents. The parents were often told little of the child’s origins, though this was only possible where “excessive” matching was upheld, as the majority of adoptive parents were white and Anglo-Saxon in origin.95

Racial “origin” was a necessary precondition for a successful adoption, but not the only one. Social workers drew on the new discourse of mental health to scrutinize the motivations of unwed mothers and adoptive parents, and children were tested for signs of “normal” inner development.96 The emergence of scientific theories about normal child development coincided with prescriptions for a maternal role that was child-centred, and women’s social position was thus more generally equated with motherhood.97 Social deprivation theories, used to detect abnormal child development, were linked to maternal failure and used to constitute what a “normal” mother was supposed to be.98 But the social practices and orthodoxies that created these very powerful norms were also dependent on specific economic and material circumstances.99 As Urwin notes, “[T]he child-centered approach ... can only gain hold or purchase where there is some minimum level of material security.”100

The fitness of parents was based on paradoxically flexible and narrow discourses (moral, medical, physical, psychological, and humanistic). Individu-
als who did not measure up were excluded from adopting, frequently because their “motivations” were considered suspect. The influential physician John Bowlby wrote that the skill required to assess adoptive parents’ motivations (but mainly those of the mother, “who is [usually] the architect of the plan”) left no room for “amateurs” who were only trained in physical hygiene (such as income and cleanliness) — an obvious nod to social workers: “[T]he baby’s mental health will depend on the emotional relationships he will have ... prediction requires good knowledge of personality and skill in interview techniques.”¹⁰¹ The question of why prospective parents had not had their own children became a public issue, and alliances were forged among the medical, psychiatric, and social work professions to determine who would be ideal adoptive parents. Within this context, social workers would have to prove they were not amateurs.

While the figure of the social worker has always been associated with families constituted as “deviant”,¹⁰² the regulatory apparatus that emerged in the postwar period expanded to administer a population newly problematized — the surplus of adoptive applicants. A critical shift turned the professional gaze of social workers towards locating so-called “normal” couples eligible to adopt. Heterosexuality was necessary, but no longer sufficient for fit parenthood. New meanings and possibilities for professional intervention were attached to the “problem of infertility” and childlessness.

**Standardizing Adoption: The Home Visit as Social Work Practice**

Popular magazines, newspapers, and pamphlets presented an increasingly standardized, normalized picture of the typical agency process. It began with an initial intake interview over the telephone with prospective adoptive parents, during which “easy” things like the applicants’ religion were checked so that referrals could be made to the appropriate Catholic, Jewish, or Protestant agencies.¹⁰³ Next, a visit to the agency for a get-acquainted session was arranged, along with other couples who wanted to ask workers questions about adoption. Popular magazine stories offered friendly, humorous accounts, and an observer at one of these sessions at the Protestant CAS described the atmosphere in the room as resembling a courtroom hush; he was sure he was the only man who had not shaved at dinnertime.¹⁰⁴

After this session, couples were assigned their own caseworker who had them fill out an application, after which the caseworker — most commonly a

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¹⁰³ The Protestant CAS also handled other religious denominations in some cases.

¹⁰⁴ Walker, “Is Our System of Child Adoption Good Enough?”, p. 72. This description of the typical agency adoption process was compiled from journal and magazine articles, a collection of government documents, and my interviews with adoption worker Sharon Peters.
woman — checked references. Because these were self-reported references such as doctors, clergymen, bankers, neighbours, and employers, agency staff said they tended to be positive. Reference letters in successful case files included phrases such as “he was a good provider”, “they had a clean home”, and “they were very good with our children”. Ministers verified whether the couple and their other children, if any, were in regular attendance at church and Sunday school, and they might also confirm the length of the couple’s marriage. Because references tended to be good, caseworkers considered the home visit to be the most important step, and arguably this became the primary reason for the social worker in the adoption process. Agencies saw this as a more crucial step because the skilled caseworker would see the couple’s home and ask more probing questions: “Why do you want to adopt?” and “Will the baby have its own room?”

During the home visit, workers also had a chance to observe the couple’s living quarters. Based on standards of physical hygiene, they could determine whether prospective parents were “fit” and “proper” applicants. Social workers’ descriptions of homes revealed older concerns with morality and cleanliness: “clean and attractive” or “clean but not especially tidy”. In one case, the worker reported that the couple’s bungalow had “old-fashioned fixtures” including linoleum throughout the house “even the living-room!” Still, it was considered very comfortable, clean, and not elaborate. The comments can tell us something about those in a position of recording, as well as how the institution producing the files was able to exercise its power. In this example, the writer emphasized that the couple should be modern but modest, capable providers, not conspicuously extravagant or materialistic.

The standard application form in the late 1940s and the 1950s included the following areas of questioning to determine parental suitability and moral appropriateness of parents’ leisure activities: radio programmes to which they listened, education they expected of the child, their health, housing, hobbies, clubs or organizations, attitude toward neighbours, recreation (“normal amount?”), social activities, church attendance, beer parlour visits or attendance at public dances, and method of disciplining. Physical and social descriptions of couples were taken, and, as Peters reported, case files from the 1950s differed in that descriptions were more “impressionistic” than in

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105 Walker, “Is Our System of Child Adoption Good Enough?” References were taken seriously, but a couple would not be chosen based on these alone. The home visit and questionnaire carried a great deal of weight.

106 Non-identifying information from case files at the Easton CAS.


108 Case files, Easton CAS.


110 This is not a complete list, but these details were obtained in an interview with Sharon Peters and match the standard blank forms found in the CAS files at the Metro Toronto Archives.
any other decade, laden with “moral overtones”. Examples of these impressions can be seen in the notes of a worker who referred to the husband in one couple as “egocentric but nice!” His wife “had her hair piled up on her head, giving her a cold appearance”. The caseworker wrote that, although the woman was nervous at the interview and remained aloof, she was “warm underneath”, suggesting the necessary social work skill of getting under surface appearances. Social workers asked questions intended to find out whether and how a couple socialized. One file noted that the husband had once been a member of the Lion’s Club and read *Time* and *Chatelaine*, while his wife’s hobbies included reading, riding, sewing, and music, but “she played no bridge”. This latter comment was used to learn something about the couple’s ability to interact with others, an important component of psychological health. Asked whether they went to the beer parlour or public dances, they replied, “not any more”, though they had the occasional beer in their own home. The sheer volume of material collected in files differed visibly between 1940 and 1960 as detailed social histories of both maternal and paternal grandparents came to be included in later files.

As Walker reported for *Maclean’s*, some circumstances and attributes could disqualify applicants immediately: being single, an atheist, or over 40 or under 25. As well, “[T]he financially irresponsible, the obviously immature or neurotic, and the alcoholics are automatically weeded out as soon as their condition is detected.” Additionally, it was important that the husband and wife got along well, had the “right” attitude towards money, were in good health, and were not too old to care for growing children. Journalist Sydney Katz found that agencies were looking for couples in which the male breadwinner could provide “a decent standard of living and has some degree of economic security”. Couples had to justify how a “working” mother would still be able to attend to her primary function of “mothering”. Moderate income was more agreeable to social workers than extreme wealth, or, as one social worker stated, they preferred couples who were “contented with their lot”. The bulk of the placements at the Protestant CAS in Toronto fell into this middle-income category. The truly moral appeared to fall somewhere between two poles: wealth and avarice at one end, and poverty equated with parental “incompetence” or inefficiency at the other.

111 Interview with Sharon Peters.
112 Case files, Easton CAS.
113 Ibid.
114 Ibid.
115 The age criteria were mainly applied in the case of couples adopting infants, whereas older parents became eligible for older children, as well as an emerging category of “hard-to-place” children. It also goes without saying (literally) that same-sex couples could not adopt.
116 Walker, “Is Our System of Child Adoption Good Enough?”
118 Ibid.
The same patterns were described by the authors of *Crestwood Heights*, a 1950s sociological study of a large Toronto suburb, who argued that “the middle-class family with breadwinner father, stay-at-home mother, and well-adjusted children” was becoming the norm or ideal toward which all families would tend to move if not “necessarily arrive”. Apartment buildings were not considered the “proper material environment for family life”, and the social, moral, and political implications of this discourse meant that respectability was becoming more and more associated with particular white, Anglo, middle-class standards of living. Despite the unlikelihood that all families could or were expected to achieve middle-class status, it was the standard against which all families would be measured. The physical and spatial designs of the suburbs were created with a conception of highly individualized families rather than fostering communities with diverse extended family networks (as was the case for many immigrant families).

That a “moderate” or middle-class life-style and income were acceptable, and in fact idealized, was borne out in June Callwood’s 1955 *Maclean’s* article about the Cooneys: a Catholic couple who had adopted seven children. But this article also suggests that the “means test” for adoptive couples was based on more than economics, number of bedrooms, and demand alone, as some parents complained about the long waiting period for one child. Religion was a mediating factor in this family’s case, as there were fewer Catholic applicants than children available. Evelyn Wood, superintendent of the Catholic CAS, described them as “ideal parents” and had them speak to a group of prospective parents. Religion was said to be the “steady core” in their household, and the Cooneys taught their children dignity and respect rather than worrying about “the tidiness of clothes”. Although Joseph Cooney had graduated from the University of Toronto School of Dentistry, the Cooneys “had yet to know an affluent period. In fact, when they adopted their fourth child they were on the brink of bankruptcy.” Lillian Cooney, the mother, ran her house without any help, “except the occasional cleaning woman”. Although their house had only three bedrooms, they were making room for an eighth child, expected within the month. Though all the Cooney children were blue-eyed and fair-haired, Callwood stated, “it’s just a coincidence”. “We don’t fuss about backgrounds,” Joe Cooney said. “[T]hey all have souls.”

121 Strong-Boag, “Home Dreams”.
When social workers were asked directly by parents and researchers how parents were chosen, they could not always identify the subtleties of the decision-making process. They were just as vague when they tried to emphasize what they were looking for. Agencies varied in their policies about whether to tell couples why they had been rejected, to avoid upsetting the couple’s relationship, and workers denied that an agency rejection meant a couple would not make good parents. According to Katz’s research, agencies in rural and urban areas had different criteria: the latter tended to have more university-trained staff and might overlook a previous divorce or psychiatric treatment that would normally immediately disqualify candidates in smaller areas. His findings lent themselves to arguments made by Charlotte Whitton and the Ontario Association of Children’s Aid Societies in favour of hiring more trained social workers within agencies. The message was that only when workers with more developed skills were available to do home interviews with clients would more couples be eligible to adopt.

Desirable characteristics were abstractly depicted as “unselfish, flexible, accepting, outgoing, warm, responsible, mature and loving”. The number of articles in popular magazines written in defence of social workers’ abilities, describing the benefits of agency over private adoptions, tells us something about the negotiation of conflict over agency practice and lingering tensions. Within the psychiatric community, critics asked whether caseworkers were skilled enough to assess such subjective criteria. The problem was defined as “technical” or a shortage of “money, personnel, and up-to-date statistics” that might have helped to assess consistency in practices within and among agencies, suggesting scientization and standardization of social work was the solution. At the same time, psychiatrist Dr. Rosen, the Toronto CAS consultant, defended the professional reputation of social workers and their role in the adoption process, arguing social work was a developing field. He added that psychiatry, also in its infancy, was in no position to criticize. As he summed it up, “someone has to do some selecting until more children are available”, and the problem was framed in market terms of supply and demand.

**Fitness and Matching**

Couples who had been accepted by agencies were told that the average waiting period before they would receive a child was nine to twelve months. One of the reasons for the lengthy period continued to be the “agencies’ thorough child testing” linked to the larger practice called matching. Matching remained an important part of the process from the 1940s until the early 1960s. Religion, race, intellect, physical characteristics, stature, and recipro-

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126 Walker, “Is Our System of Child Adoption Good Enough?”
127 Ibid., p. 74.
128 Ibid.
good health tended to be the priorities in placing children. The stress placed on matching physical characteristics was supposed to ensure bonding between the parents and the adopted child. If there was a reason to believe that bonding would not happen, the baby would not be placed with a particular couple. While workers thought it was important to match the intelligence of the child with that of the parents, they admitted that only very crude tests for infants were available. It was assumed that children would inherit almost the same intellectual level as their natural parents, though most tests were only done on the natural mother because the putative father had fled.

Peters was critical of the problem of “over-placing”, in which a child with a “mediocre” background (as predicted by its social and biological histories), was placed in a more privileged home environment. She was steadfast in her belief that a child tended never to be placed in a “blue-collar” over a “professional” family. The downside of this practice, she believed, was that professional parents placed high expectations on their adopted children, who in many cases were bound to fail. Roland Hennessy, the supervisor at the Toronto Catholic CAS, boasted of placing a “high average baby with a university professor and his wife”.

Another superintendent of child welfare services spoke of placing a baby with a university professor even though the natural mother’s intellect was “borderline” because the baby and parents matched in every other way. In a number of cases the social workers admitted taking chances with “over-placing” and “under-placing” children based on their own predictions of a child’s potential.

Most agencies also admitted trying to match physical traits like the “size and colouring” of child and parents, although parents who were too specific in their descriptions for a child risked rejection by social workers who felt they were trying to “duplicate a baby who had died”. In the same article, the director of the Jewish Child Welfare Bureau in Montreal said, “[I]t couldn’t matter less what people look like ... as long as they feel like family.” Yet his sentiment was not shared among the majority of social workers at the time. Some agencies placed black children with white families, while others said they “wouldn’t dream of it”. “Mixed race” and non-white babies often

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129 Red hair, especially on a male child, slowed down the child’s placement. Peters said there was a general fear among social workers that males with red hair also had curly hair, and so all they could see developing was a “mop of fuzzy, red hair”. Thanks to John Hart, who suggested red hair would undoubtedly present a problem for the “as if born to” myth. Couples would have had to construct a social history for the spontaneous emergence of red hair.

130 Interview with Sharon Peters, Easton CAS, August 1995.
131 Ibid.
133 Ibid.
did not even make it into the preliminary stages of adoption. Peters confirmed that it was quite common for couples to announce that they were not prejudiced and then proceed to add that “they’re not concerned about racial origins [but they did not want] a Negro, Oriental, or Native”. She believed that couples thought they had to give the correct answer to the question of prejudice and did not see it as a contradiction to request a specific child. Despite such conflicting statements from one couple, the records of their file indicate that the worker found them to have a “healthy attitude” towards the unmarried mother because they felt that “environment and training were more important to heredity”. The assumption that a healthy attitude was congruent with a desire for racial sameness offers us an example of the changing conceptions and flexible formations of race, racism, and racialization.

Couples, especially mothers, were also expected to supply appropriate reasons for wanting to adopt children. One response that raised the personal hackles of many adoption workers was hearing that the couple wanted a “companion” for a previous child, as workers knew this was something no family could count on, and children were not “companions”. The “desire to complete a family” or “be of service to a child” were the most often quoted responses and therefore may have been understood by everyone involved to be appropriate.

Grace Gallay, an adoption social worker for over 17 years, reported in Canadian Welfare that couples’ motivation in applying for a child was one of the most important factors in determining their suitability. Motivation for adopting was undoubtedly the most indeterminable category, a factor that contributed to the appearance of subterfuge on the part of social workers, a charge levelled by couples, their doctors, and lawyers. It is also clear that the slippery psychological category of healthy motivation was not adversely affected by a couple’s request for a white-only child.

Not surprisingly, couples rejected for adoptive parenthood were less supportive of agency procedures than their successful counterparts, and, according to Walker, so were most members of the general public: “An image of social work as a profession hasn’t altogether supplanted the outdated image of the ‘district visitor’, a condescending upper-middle-class spinster meddling in the lives of the poor.” Although Walker tried to de-gender social work, he was unable to equate being an unmarried woman with being a pro-

135 Interview with Sharon Peters, Easton CAS, August 1995.
136 Case files, Easton CAS.
138 Barbara Melosh found that some of these responses were euphemisms for creating a gender balance in families (Strangers and Kin).
139 Gallay, “Interracial Adoptions”.
The gendered nature of social work and medicine underpinned the longer-standing professional rivalry over who would be the arbiter of parental fitness.

Speaking directly about judging the fitness of prospective parents, Dr. Danial Cappon, a psychiatrist at the University of Toronto, referred to current agency practice (in 1959) as useless. He wrote on behalf of one of his own male clients who had been rejected for adoptive parenthood after admitting to having visited a psychiatrist after his child had died. Cappon suggested that a more equitable system would be a first-come, first-served list, in which one moved to the top of the list “whether the social worker likes you or not”.141 His statement alludes to the presence of doctors who may have fought back against social workers who were pushing agency over private adoptions and thus limiting the role of doctors in the process.

Further evidence that there was still public scepticism about the benefits of agency adoptions is provided by the zealousness of articles defending them in popular magazines. The element of uncertainty in determining parental fitness was reflected in a feature article in Chatelaine by Sidney Katz in 1957, entitled “Why Can’t You Adopt a Child?” The header for the article states, “You and your husband may be healthy, intelligent, well-to-do — and still an accredited agency won’t give you a child.”142 The article indicated that editors across the country received letters from childless couples who tried to adopt but were rejected. In one such letter, the female writer represents the now normalized ideal adoptive family:

Dear Sir:

We are a childless couple who have been married for twelve years. My husband is forty-one, I’m thirty-five. Four years ago, when it became certain that we wouldn’t have children of our own, I applied to adopt a child in our local children’s aid society. After a good deal of investigation they told us they didn’t have a child for us. Why? I’m certain we can provide an excellent home for a child. My husband makes $5,800 a year and has been with the same firm for twelve years. We’re both in good health. We are regular churchgoers. We have a well-furnished six-room bungalow in the suburbs — ideal surroundings for a growing youngster. Why won’t they give us a child?143

Katz reported that couples like this who did all the “right” things were told that there were just not enough children to meet the growing demand in adoption, forcing many couples to go “behind the agency’s back” to the “black” and “grey” markets in private adoption. Katz portrayed himself as an objective, understanding observer, reassuring “above average” couples that they

141 Ibid.
143 Letter from a Mrs. Helen I. in Ontario, ibid.
were not alone and should still stick with the agency process, reiterating the claim that the problem was just a shortage of adoptable babies. The letter to the editor also provides an example of what Valerie Korinek describes as the complicated exchange between producers and consumers, or magazine editors, letter-writers, and readers. In her analysis of *Chatelaine* magazine and its readership in the postwar years, Korinek cautions against simply reading popular magazines as one-directional prescriptive advice literature, arguing that editors had to respond to outraged readers, often pushing debates within the magazine in critical directions rather than simply reflecting and reinforcing the status quo. She offers a revision of the celebratory, nostalgic versions of life in the suburbs, confronting the homogeneity of the period and instead looking at signs of rebellion and resistance. The popularity of the women’s magazine *Chatelaine* developed not because it distilled gender prescriptions but because of the “oppositional or subversive material it published”. As the above writer believed, however, it was the ideal or “status quo” that was under siege.144

National Fitness and Responsible Citizenry

In the immediate postwar period Charlotte Whitton had called for a “steady supply of children, preferably very young infants, from somewhere”145 However, a decade later, the large number of “unadoptable” children in the care of the CAS led to criticisms that the Societies were putting more effort into meeting the needs of adoptive parents than those of children.146 The growing problem of unwanted children shifted the focus on fitness in adoption practices in at least two ways: adoption became an implicit recruitment process, but also one riddled with suspicion. Adoptive parents willing to accept this challenge found their motivations given particular scrutiny and assessment.

Despite the new knowledge of child development147 and the increasing demand for adoptable infants,148 many children were still considered “hard to place” if they did not fit the image of an ideal infant, described as “a blue-eyed baby girl with blond curls and musical ability”.149 Although the heredi-

146 Aitken, “Criteria of Adoptability in Ontario”.
147 Increasingly, experts in the field of child psychology emphasized the need to place children as early as possible, as new knowledge focused on the importance of early attachment as part of “normal” development. Agencies had been waiting, watching a child’s development before placement, to predict normal development.
149 This description came up in countless references to the “ideal” infant, and it reveals the persistence of certain hereditary theories held by adoptive parents. Walker wrote that one could get a laugh out of a social worker just by saying, “Blond, blue-eyed girl less than a month old” (“Is Our System of
hystory discourse may have changed, psychological tests, used to determine the child’s level of intellectual development and suitability, were a response to fears held by parents and social workers about whether delinquent or other kinds of behaviour or ability were inheritable. As a visible reminder of the "as if born to" fiction, many of the anxieties of the period centred on mixed-race children, including a notion of who the ideal citizen could be. What differed was that psychological discourses, which separated the mother from her child, purportedly erased class differences, a shift captured in the claims of behavioural psychologists such as John Watson, who boasted that he could make a child into anything given the right environment.¹⁵⁰

The 1954 Child Welfare Act determined that not all wards were adoptable, and the government decided it would take part in publicity on behalf of “hard to place” children.¹⁵¹ The government of Ontario led the way for other provinces in an innovative advertising campaign geared towards finding homes for these children.¹⁵² This move dovetailed with the establishment of a provincial Adoption Co-ordinator and an Adoption Clearance Bureau, aimed at streamlining adoption placements by matching potential adoptive parents with children previously considered "unadoptable".¹⁵³ Mounting costs were singled out by the Children’s Aid Societies as the reason for their reluctance to take responsibility for all crown wards who came into care, especially the “hard to place”, and the societies indicated this was a provincial responsibility. Designed to “boost” the number of adoptions every year, the advertisement of children in every weekly and daily newspaper in the province met with huge success.¹⁵⁴

The adoption campaign was launched with an article in Chatelaine in 1955

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¹⁵⁰ To paraphrase the words of behavioural psychologist John Watson: “Give me eight infants and I’ll make you a tinker, tailor, soldier, sailor, rich man, poor man, beggar man, thief.”


¹⁵² A Child Welfare League report in 1960 criticized the dilapidated environment in which children within institutions run by the Toronto CAS were living. This contributed to public awareness of the need to change adoption policies, specifically the criteria of adoptability, which emphasized the matching of racial and religious origins. See Aitken, “Critical Compromises in Ontario’s Child Welfare Policy”.


¹⁵⁴ Examples of these strategies included “Today’s Child” (“The Boy on Page One”, Ontario Department of Public Welfare, 1960, pp. 1–63) and CTV’s “Family Finder” programme in the late 1960s (Archives of Ontario, RG 29 Files).
by Dorothy Sangster, entitled “The Little Girl Nobody Wants”. It opened with a familiar image: “Donna is five years old. Her hair is silky blond, her eyes are cornflower blue, and her sturdy body sways sweetly as she sings her dolly good night. The world is full of grownups whose hearts ache for a child in the house this Christmas, and there just aren’t enough little yellow-haired girls to go around.” But, as the title alluded, this story had an ominous twist: Donna was described as the one child in a thousand who was “tragically born with the disfigurement of hare-lip and cleft palate”. She had already been through two failed attempts with adoptive placements, and this story was seen as a last-ditch effort to find her a home. Sangster employed this story on behalf of other children across Canada referred to as “handicapped” in some way, whether their disability was physical, a slightly below average IQ, or “mixed racial origin”. She reported that these children were rejected automatically by couples who were convinced that “the only child they can safely entrust with their name is one who is white and Anglo-Saxon to the core”. According to Sangster, ten years previously, agencies had been reluctant to place such a child, and she quoted one Toronto worker who admitted, “We used to give only the gilt-edged child to the gilt-edged family. The result was that many good people never got a child and many perfectly good children never got adopted.” Mary Speers, head of the Toronto CAS adoption department, stated that couples who adopted a “different” looking child were considered “suspect”: “Didn’t they merit a better child?”

The response to the story about Donna’s plight was extremely positive, and couples who wrote in expressed interest in other children like Donna or those of “mixed racial origin”. Although many social workers had mixed feelings about using publicity to advertise for homes for children, the actions of potential parents who wrote to agencies over the next years could not be ignored. The success of the campaign convinced social workers that homes for “hard to place” children could be found, but it also made clear the ongoing power struggle between the agencies and the provincial government and the latter’s growing dominance in directing policy. Government officials were becoming less open to policy input from agencies, and the adoption promotion campaign had been launched with a hasty phone call to “certain CAS”.

During my first conversation with Sharon Peters in 1995, she said that the oddest thing still occasionally happens around Christmas: usually older couples will call the CAS and ask if there is a little child who needs a home for Christmas. I told her about this particular article and we speculated as to whether these types of campaigns were related to the current response.
156 Sangster, “The Little Girl Nobody Wants”.
157 Ibid.
158 Ibid.
159 Ibid.
160 Ibid.
161 Ibid.
without any prior consultation with the Ontario Association of Children’s Aid Societies.163

Donna’s story also revealed that the range of “acceptable” children was not the only policy that needed expanding. Between the two failed attempts to place Donna, she had lived for three years with two foster mothers: an elderly widow and her unmarried daughter Gladys. Together they made Halloween costumes, brought her to kindergarten and Sunday school, and took her for treatments and surgery at Toronto’s Hospital for Sick Children. However, they were not allowed to adopt Donna because the agency said it had to take the “long view”, and the fact that there were no men in the house was a concern: “[A] girl with Donna’s problem needs to grow up with a father, and possibly brothers, to give her a relaxed feeling with men and therefore a better chance for marriage and normal family life of her own some day.”164 Donna’s security and psychological well-being (notably her femininity) could only develop by having what the worker called a nice (heterosexual), middle-aged couple who had nothing to prove and who could focus on the needs of the child rather than demanding beauty, talent, or intellectual ability.165

At the outset, it was clear that the goal of the Ontario government’s advertising campaign was to provide a new pool of “adoptable” children, while not necessarily expanding the range of suitable adoptive parents. The agency was still firm about who was obviously unsuitable to adopt, and candidates were rejected on the basis of “youth, single persons, or common-law unions” as well as “emotional replies”.166 Of the interviewed couples who expressed a desire to adopt a mixed-race child, the agency determined appropriate motivations and reported: “In getting to know these families, who are white, we have arrived at the comfortable conclusion that they have the background and attitude to be successful parents to one of these children.”167 Religion, age, marital status, and “home environment” could still be enforced because, as Katz noted, there was still a “surplus” of “above average” members of the community wanting to adopt.168 In advertising campaigns, a larger national discourse was called into play, which inculcated an obligation on the part of white parents to adopt these children whom “nobody” wanted. The recruitment of parents carried missionary overtones as parents were asked to rise to this national challenge. Implicitly, children who fell between the cracks

163 Ibid.
164 Sangster, “The Little Girl Nobody Wants”.
165 Ibid.
167 Ibid.
168 Katz, “Why Can’t You Adopt A Child?” Around this time, the Canadian Welfare Council was also beginning to get involved in international adoptions, acting as the Canadian agent in determining whether naturalization and citizenship papers would be granted.
could, as symbols, potentially compromise Canada’s self-representation as a nation of “difference” and plurality.169

For social workers administering these placements, the stages of adoption did not greatly differ in placing this new group of children; however, the definition of fitness was expanded to include the religious and humanitarian motivations of couples. Furthermore, an extra step called a “showing” was added, in which social workers arranged to bring the child to a restaurant so the couple could view him or her from a discreet distance without the child’s knowledge.170 While this practice was appropriately seen to protect the child from further potential rejection, the choice of location for these viewings provides particularly apt metaphors for the construction of belonging; the Toronto CAS reported that in summer the zoo was the favourite spot, and in winter the museum was used. In these interactions it is not clear who is viewing whom — social workers viewing parents, who were viewing children served up as natural and cultural objects.171

Religion was still an overriding concern well into the 1960s, and the Protestant CAS still excluded agnostics and atheists from adopting even those children classified as “hard to place”.172 Narratives of the multicultural nation were drawn upon and, like earlier reform movements, they echoed a familiar discourse in which religion and civilizing could “trump” race and heredity. Examples are seen in these ads:

DIANE ROSE is a little 2 year old, a dainty little girl with brown eyes and light brown hair. Her racial background is Polish, French, and Negro. Her complexion is light brown. She is a smart, attractive little girl and needs coloured or white Roman Catholic Parents.

DENNIS will be a year old in February. His racial origin is Danish and Negro. He is a sturdy well-developed baby with blue eyes, blonde hair, light brown complexion and Negroid features. Responds well and is a placid and happy baby. Dennis would be happy with white or coloured Protestant parents.

FRANCIS has a ready smile, impish look and is most appealing. He is active, busy and bright. Francis is a Roman Catholic, French-Canadian and Indian with dark hair and eyes, fine features and medium dark complexion. He is an endearing wee boy.

LARRY is a big boned, husky 3 year-old Indian Protestant boy with dark eyes, hair and complexion. He has average intelligence and is in good health. [He] is

169 Thanks to Kathyrn McPherson for her insights in drawing out the missionary aspects of this article.
170 Ontario Department of Public Welfare, “The Boy on Page One”.
171 Sangster, “The Little Girl Nobody Wants”.
a shy placid child and needs Protestant parents who will be proud of his Indian heritage.

The valorizing of children previously considered unplaceable revealed the presence of a number of overlapping narratives: Canada’s self-representation as a “multicultural” nation that differed from the United States; liberal humanism and pluralism built on the postwar rejection of fascism; and, finally, the assumption of a scientific racialization that ascribed differences based on phenotypes. Children previously “excluded” were now being offered a chance, and “liberal-minded” parents could join the Canadian “family” through adoption in concert with what Veronica Strong-Boag argues was a means of preparing the “Just Society” during this era.

Thirza Lee, an adoptive mother of eight (four of whom were mixed-race), claimed that she could see the “precious souls beneath the darker skins”. She referred to racial discrimination as a great evil and asked how in this great Christian country of Canada could there be children whom nobody wanted. However, even she and her husband had initially requested babies that were as much like them as possible. She concluded her story by expressing the great potential she felt within her family, and that this was the way God intended it to be. The language of both the advertisements and the anecdotal accounts of families who had adopted “mixed-blood” children was overlaid with what Mackey describes as attempts both to celebrate and to contain difference wherever possible.

Protestant and liberal humanist discourses were based on the idea that, underneath the surface variation in phenotypes, these children were still human and Christian. However, the ads exhibited a persistent anxiety, as they simultaneously emphasized those features associated with (a particularly narrow ideal of) European descent such as fair complexion, blue eye colour, blond hair, and “fine” bone structure. These ads were both products of and contributors to an insular benevolent discourse that was also taken up in popular magazines and newspaper articles. Bound to an older set of practices,

175 Lee, “ How We Adopted AN INTERRACIAL FAMILY”, p. 70.
176 Ibid.
177 The large number of children who were identified as “mixed-race” in the new ad campaigns also reveals the absence of information about their birth mothers in the few accounts of maternity homes available in Ontario, as well as in provincial statistics. In the United States, Rickie Solinger found that fewer resources were provided for black unwed mothers, who were considered a “bad investment” in a market where most competitors were “white”. She describes the different treatment of white and black women as between shame versus blame. Women who relinquished their children in a form of “redemption” could be treated differently than those who kept theirs.
they were not based in any analysis of systemic racism in social work or adoption, particularly the colonial displacement of First Nations children.  

By the mid-1960s, with the growing emphasis on placing older and mixed-race children, the ideal of a fit adoptive family was supposed to consist of therapeutic parents who did not need a child and were not expecting one child to fill all their requirements. In the course of half a century, the child had gone from being an economic necessity on the family farm, to being economically “useless” but filling an emotional need and representing a unit of consumption in the pro-natalist 1950s, and finally, influenced by the civil rights movement and theories of zero population growth in the 1960s, to meeting the altruistic goals of politically and socially astute parents.

Conclusion

Before 1940 and again after 1970, most adoptions were private agreements. The decline in agency and domestic adoptions in the 1970s can be traced to a number of factors: decreased availability of “healthy white infants”, extension of Mother’s Allowance to “unwed” mothers, legalization of birth control, and the availability of therapeutic abortions. From 1940 through the 1960s, however, Canadians relied on the agency process 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 and state-regulated adoption by creating a scientific and standardized adoption protocol that purported to protect adopted children and to facilitate the composition of healthy adoptive families. In turn, adoption proved vital to social work’s ongoing effort to define itself as a legitimate source of expert knowledge. Marilyn Strathern tells us that “culture consists of establishing ways of bringing ideas from different domains together”. In the postwar period

178 Pete Hudson and Brad McKenzie, “Child Welfare and Native People: The Extension of Colonialism”, *The Social Worker*, vol. 49, no. 2 (Summer 1981), pp. 63–88. The authors describe the child welfare system as a form of “cultural colonialism”, pursued through normative control in tandem with other more explicit forms. Writing in response to the overwhelming number of Native children in “care”, they argued that decolonization would not be realized through changes in social work “technique”. Decolonizing the fields of child welfare, health, and education would only come through resolving outstanding land claims, together with the goal of economic self-sufficiency.

179 Garber, *Disclosure of Adoption Information*.


181 Peters described changing motives of modern couples in the 1960s who called themselves “zero population zone” couples and made a political choice to adopt rather than have their own children. She confessed that, in those “heady” days, workers were not as fussy about whether people already had children.

182 Melosh, *Strangers and Kin*.

social work borrowed and combined ideas from neo-Freudian and ego psychology, while tying itself professionally to the medical profession. For social workers, adoption had become a site of “ongoing work” in which the boundaries and content of the social were re-conceived as the line between public and private life was renegotiated. Nigel Parton argues that a wide range of practices within fields such as philanthropy, psychiatry, and social work were central to the emergence of the “social”, viewed in this case as a hybrid space between public and private. The concept of the social was a solution to the problem posed by the developing liberal state: how to intervene in the family while protecting its autonomy.

Like Rose and Gleason, Parton sees social work as a practice of regulation by which (some) subjects express themselves through confession (talking, interviewing), and experts (social workers) are seen as “interpretivists”. Rather than a simple model of social control, social work is seen as speaking on behalf of those it regulates, and therefore it needs discretionary knowledge. In part because of concerns over the discretionary practices of social workers — they were seen as not speaking on behalf of either potential parents or children — an explosive oppositional discourse emerged. Facing challenges to the plight of unadoptable children from the media, the public, and government, social workers redoubled their efforts to find homes for “hard-to-place” children. Social workers enrolled their own colleagues in changing adoption practice by enlisting the “humanist” impulse of parents in adopting “unwanted” children. In 1963 Grace Gallay, a social worker for 17 years, exhorted social agencies to reflect on their current practices. She wrote:

[C]uriously enough, many children’s agencies are a little shy of change in actual practice … some find it difficult to offer a “hard to place” child, perhaps through fear of failure or rebuff. Others are wary of the deep-down motivations, perhaps unrealistic, which may prompt some couples or unconsciously, some agencies have been fearful about community attitudes toward their practices … [but] agencies, like any community leaders, must take on the responsibility for leadership [and] encouraging change where change is needed.

In arguing for this change, social workers were able to draw on Canada’s emerging national self-image as a liberal, just society, distinct from that south

187 _Ibid._, pp. 15–16.
188 The missionary drive gradually extended to “war orphans” outside Canada. By the 1970s this included Vietnam, Bangledesh, Korea, and Colombia. Archives of Ontario, RG 29 Files.
of the border. Yet, by insisting that hard-to-place children had the right to be part of a family, social workers exposed the fictions of race upon which their own scientific matching practices depended and which they had helped reconstitute through the naturalizing categories that facilitated standardized adoption practice.

The Shinder case of 1953 had exposed the potential cracks and chaos of private adoption arrangements in Ontario (and beyond), to which social workers needed to bring order. As a potent example, the case also allows us to employ differences in scale: to view social workers’ assessments of individual fitness for adoptive parenthood together with fitness for citizenship on the same screen. Fluid and flexible notions of fitness, like race, were mobilized to justify the exclusion of some from potential parenthood and, with it, their exclusion from citizenship and national belonging. While social workers may have lost particular forms of authority in determining the construction of adoptive families, social work discourse (for example, environment/fitness) has become part of normal science. Social workers during the 1940s to the 1960s translated psychological and psychiatric knowledge, providing new spaces for its circulation and labour, and as a result expanded the truthfulness of psychology and medicine in shaping family and nation.

190 Strong-Boag, “Today’s Child”.
191 Ann Stoler and Ena Dua have both shown how wide applications of the notion of degeneracy were used by both left and right politics in colonial and domestic contexts aimed at indigent, poor, white internal populations and those “who veered off bourgeois course in their choice of language, domestic arrangements, and cultural affiliation”. Ann Stoler, The Education of Desire: Foucault’s History of Sexuality and Colonial Order of Things (Durham, NC: Duke University Press, 1995), p. 33. For Stoler, it was a “mobile” discourse of empire that “designated eligibility for citizenship, class membership, and gendered assignments to race” (p. 32). Ena Dua, “Governmentality, Emperialism, Race and Citizenship”, in D. Brock, ed., Making Normal: Social Regulation in Canada (Toronto: Nelson, 2004), p. 59.