

Transcript from "Remove and normalize": Discussing Canada's residential institution history with Megan Linton

Audio Transcript by Julie-Ann Lee

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(Theme song - soft piano music)

ABK: Welcome to Noncompliant. I'm your host **Anne Borden King**. Today, we're going to be talking to **Megan Linton**.

Megan is a disabled student, earning her Masters of Public Policy and Administration at Carleton University, where she is currently working on thesis research surrounding Sexual Citizenship for Institutionalized Populations. Megan's research interests include data gaps and disabled people, incarceration and legacies of eugenics in Canada. We're going to be talking today about the residential institution system targeting autistic and intellectually disabled youth in Canada, and Megan's work on sexual citizenship within those populations.

We'll be focusing first on the large institutions and then on the small "i" institutions – such as group homes. All of these places where youth and many adults are housed against their will are called Congregate Care Settings as well, and sometimes youth are placed into long-term care homes. We've been hearing a lot about long-term care homes since the COVID crisis because congregate care settings are a site of disease, death and health risks due to the very nature of Congregate Care Settings, and like so many social issues now with COVID, it's now news.

So, I wanted to start by giving an example of a specific institution in Southern Ontario, kind of as a touchstone for what is happening in Canada, and then we'll break it out into the discussion.

The institution I'm talking about is the CPRI. CPRI is in London, Ontario and it is really kind of like a microcosm of the whole post-institutionalization environment in Canada. The CPRI opened in 1910 as a tuberculosis sanitarium located on a road called Sanitarium Road and at the time it brought a lot of jobs into the community for people working in the sanitarium, but once our approaches to tuberculosis changed, sanitariums became obsolete. Now, you or I might say, "Great, turn it into an office building or a hospital, or make a park," but with these kinds of things in Canada, politicians were often just thinking about rebranding the space to keep the same kind of jobs, and money, and votes flowing into their lives. So, they didn't do what they should have done.

Instead they created a need that wasn't there. And, like many former tuberculosis institutions, the sanitarium in London was rebranded as a home for disabled youth, where they would live in large congregate spaces, segregated away from their families. And then the Sanitarium was renamed the CPRI which stood for **Child Psychiatric Research Institution**. Now, there were several hundred youth in this institution living there in that capacity, but then Canada decided to de-institutionalize in the 1990s due to massive human rights abuses, and class actions cases against residential institutions.

But, again in the case of the CPRI, as many institutions in Canada, they only de-institutionalized in name. They didn't really de-institutionalize. And the CPRI just renamed itself, so now it's called the **Child Parent Research Institute** still down on Sanitarium Road in London, Ontario and still a residential institution, and now the subject of a massive class action, like many other residential institutions, based around human rights issues. I think the CPRI is really kind of emblematic of what's happened in Canada in terms of Canada speaking to the need to de-institutionalize youth, but not really doing so. And, so, I want to bring it up as a symbol of the problem that we're facing as we go into the discussion that we're having.

So, Megan, can you tell me... let's go back just a little bit to the beginning. When did it become common to house intellectually disabled youth and other disabled youth in very large institutions in Canada?

ML: Yeah, so the growth of institutions started in kind of the growth of colonial Canada, so throughout the 1860s we saw a real development of all forms of large-scale institutions. This meant the development of Indian Residential Schools, the legislative buildings, universities, carceral settings, and then at first it was the development of the asylum.

So, in Ontario, they actually developed asylums last, because of the really large role of the Social Reform Movement in Canada, and so they were supposedly against the penal system, and were really focused on a form of moral treatment wherein people would go and be instilled with Protestant values and be cured of their deviance. So in 1876, the first institution was built in Ontario, that was the Orillia Asylum, and from there, there was at the same time a concurrent growth of eugenics by Francis Galton and so we saw this real growth of eugenics and at the same time there was also the growth of the biomedical complex and so as those two emerged, the real solution that they provided was that disabled people need to be institutionalized in order to, it started out as a sort of saviour complex of protect them from the rest of society because they're innocent, and then shifted into they need to be completely isolated in order to prohibit the reproduction of disabled people.

Between 1876 and 1914, that's when the vast majority of the institutional policy came to be, and so in that time, **Emily MacMurchy** was the inspector of the "feeble-minded" in Ontario and she enacted quite a sweeping range of changes into the institutional system that meant the

massive warehousing of disabled people, particularly disabled youth. This was because of this fear, the production of deviance in Canada. There was this real desire at the time for a white nation building, and the political elite were very concerned about people who deviated from those standards.

They would enforce institutionalization--this meant that all schools, carceral settings, all of the penal institutions that existed, all of the different forms of government support...houses of industry, workhouses, almshouses, female refugee houses, began to do testing for 'feeble-mindedness' at the time and then this resulted in quite a significant uptake that didn't actually become really massive until after World War 2.

ABK: Yeah, I'm interested to hear about ...you mentioned eugenics, and obviously sterilization was part of it, so it became a way to segregate and stigmatize people and then it also became part of a eugenics agenda. I'm wondering why after World War 2: why did it take off even more?

ML: It was interesting because in Western Canada we saw the overt usage of eugenics, so in Alberta there was the Sexual Sterilization Act that forcibly sexually sterilized disabled people or people labeled with intellectual disabilities, and that also happened in... there was also similar legislation in BC that had much less impact, there were, I think, less than 1,000 people sterilized under that piece of legislation which is still significant, but in Alberta it was over 3,000. Ontario didn't have the overt sexual sterilization policy that the western provinces had and instead used the institutions as a form of sterilization.

This meant that the men and women would never come in contact with each other, they were often actually institutionalized in separate institutions. And so this eugenics ideology was very common in Canada up until World War 2 and then it became a bit controversial that they had the same mandate, so then they changed their path, and that's really when normalization became the primary treatment for disability at that time. This was **Wolfensberger** and he really believed in institutionalizing people in order to make their life as similar to that of "normal" people. So that's really the ideology that took off after that.

The scholar **Madeline Burghardt** also does a really good job of connecting the role of Cold War conformity to the increase of institutionalization... At the time they were trying to build this ideal family. That's really when the nuclear family became like so popularized, and any form deviance from that was then.. scary and... critiqued and so then that resulted in the mass institutionalization that went from about 300 people per institution to up to 3,000 people. But even the [estimation of] 3,000 people is likely to be an underestimation.

ABK: But the rhetoric of normalizing them is bizarre to me, because there is nothing *normal* about the lives they were living in those institutions.

ML: No, nothing normal at all. But really it was just a way to, I think, rationalize forced labour because so many of these institutions had become massive workhouses. During World War 2, there was... they produced sleeping materials, they produced uniforms, and became completely self-sustaining.

The number of workers was so low at these institutions, and so then the institutionalized people were forced to work, and that really was the production of normalcy; it was this reliance on capitalism and capitalist work. And so, as soon as someone is “able to work” then that is what *normal* is, even if that work is both coerced and unpaid.

ABK: Unpaid, right, and that’s what a lot of the class actions have been about is that the people laboured and laboured for nothing. I mean, they earned nothing! And they had these huge farms and the people who owned and ran the institutions profited, like, very richly from this.

What’s mysterious I think, to me as a person living in the present day, is why a parent could be convinced to send their child away to basically a work camp, where they are working for no money, and they are segregated from their family, they are segregated from society. But I think the answer may lie within what you were talking about in terms of that conformity, not only the promise that somehow it would normalize them which – it didn’t, we know it’s not a ticket to becoming integrated into society – being put in one of those places.

But, not only the promise of normalizing them, but removing them from the rest of the family so that the *rest of the family* could have the appearance of being normal, because the “abnormal” member of the family was disappeared from that picture, and we see that still today with the new kind of... you might call them ‘neo-asylums’ where people are still being sent and isolated away from their communities.

ML: Yeah, exactly, So, I think you got it exactly. It was this creation of the non-deviant, of the conformed family of this like, expectation of perfection, and expectation of nuclearism, and also like, of nation building. This was the goal of the moral reformers for decades leading up to that point. Like, every single part of the production of Canadian citizenship was about enforcing order, and was about enforcing conformity, and so when we saw the construction of the carceral settings throughout the mid- nineteenth century, then we too saw the building of the Canadian citizen –the ideal citizen [and] if you’re not the ideal citizen then you will be institutionalized. And if you’re not... if you’re a ‘good person’ then you won’t be institutionalized.

So, this construction of the deviant Other who needs to be put away and the only people left outside of the institution are those who are... conforming.

ABK: It seems like it was less socially acceptable following the War to just outrightly talk about eugenics, but people still were being either sex-segregated (so sort of de facto eugenics) or they were still being sterilized even in the post-war period, right?

ML: Yeah, exactly. It's quite remarkable. We see that eugenics is built into the very production of the institution but then after eugenics supposedly left the mandate, it was still a huge part of how these very institutions existed. So, it might not have been used... said the same way, but because there was this forced sex segregation there was this complete lack of conversations around sexuality, and because the only form of sexuality that existed... or not the only – the dominant form of sexuality that existed was that of abuse and assault.

(15:28)

ABK: Can you talk a little about that? What was the environment like for people... I mean they were very, it was very easy for a victimizer to go to work in one of those places and ...be able to get away with doing that. There was no kind of process or recourse, or really protection for the safety of the people in these institutions from the staff, is that right?

ML: Yeah, absolutely, so... there was a complete power dynamic between patient and staff and also expectations of patients. So the construction of the 'feeble-minded' woman meant that she was victimizable. Meant that she was a victim and continues to mean that, and so of course, then it creates the environment where if you are assuming that someone is a victim and needs to be protected, that they are then victimized.

And in building these institutions where they were supposed to be protecting people, they were harbouring the very violence that they were trying to shelter them from and the institutional environment itself was that of abuse. **Goffman** calls it the "total institution," what that means is that these institutions were completely removed from everything around them. There's no way to be able to have access to any form of due process because you are 1. Unable to get to town and then also unable to have any form of intimate citizenship – so you're unable to have those friendships, those relationships that protect us, that keep us safe, and that we know keep us safe. Instead you are just left with the institutional structure and the institutional people which created an absolute perfect space for assault and abuse, just like was common in all forms of carceral settings, and continues to be.

And, I think that the... in Manitoba, that was one of the major things that came out of the **Freedom Tour documentary** was they talked about both the usage of sexual sterilization as part of eugenics but then also sexual sterilization in order to prevent residents from having children because they were assaulted by workers.

ABK: Yeah.

ML: Yeah.

ABK: What happened if someone, prior to the class actions--because we know there were big class actions about sexual assault and all forms of assault and abuse and exploitation, going into the hundreds of millions of dollars in these settlements--but before the settlements, what did individuals or their families do to try to address this if a person was able to, you know... get their family to understand what was happening to them. Were there any lawsuits, was there any kind of way for people to pursue that prior to the post-institutional era?

ML: Absolutely not. At the time there was an Inspector of these institutions. That role of inspector was largely held by people who were overt eugenicists or part of the moral or social reform movement. Like I was talking about before, like Emily MacMurchy, her role as Inspector wasn't necessarily to protect residents but rather, was that to confine residents.

The closest thing that we have to evidence of this today or what some residents did as a response or what was going on... [was] in 1959 there was a *Toronto Star* article that came out. And this was like a major exposé into **the Rideau Regional Centre** and this talked about (similar to what had been reported earlier in carceral settings) about institutions that were completely overrun with people, where they were trapped in barns, where there were dorms built for eighteen people holding up to fifty people.

That article was a pretty big watershed moment and led to a lot more of the parental organizing, but the first report that was critical of the institutional structure was entitled the **Williston Report** after one resident had died by suicide, while still in the care of the Rideau Regional Centre, and then another resident was found extremely abused and under duress. These cases led to a pretty major report that came out called the Williston Report which led the way to de-institutionalization, but that was really the first time that there had been a critical body within the centre. And so, the major version of what people would do was they would run away, and we know that that happened. There's lots of evidence of that and of being found and being brought back to the institution. So, there was very little [other evidence], I have to say.

ABK: What happened? What was happening culturally to finally allow people to go in and have a look at what was happening, to have these exposés actually be printed and approved by an editor and *believed*? That was a really new thing, as you mentioned. So, what was happening in society that was allowing society to open up to the fact, and to open their eyes to see what was going on there, and that it was wrong, morally and ethically?

ML: Yeah, so the Williston report came out in 1971... that was following the Civil Rights Era and the major revolutions that started happening in the States. Specifically in regards to de-institutionalization, the **Independent Living Movement** started in Berkley and transformed the States quite significantly. So, people who were at those conferences and those protests and events in the States - like parents – went to those from Canada and came back and there was a real movement both among parents of disabled children, but also of disabled adults, to de-institutionalize and to start talking about these institutions.

And so in 1971 this report came out and it was a sweeping condemnation of institutions and stated in 1971 that institutions need to be... they need to transition out of the institutional model. This was followed by, in 1973, another government report and then subsequently the development... the shift of these services from the Department of Health to the Disabilities Services Office and the Ministry of Community and Social Services.

It was really a combination of both the Civil Rights Era happening which allowed for people to even consider disabled again, and then the subsequent reports that happened. So in 1959 a *Star* Reporter just stopped at the institution because he wanted to see and brought his camera with him and that was really one of the moments – actually the usage of cameras in institutions was a pretty major turning point. There was another American photographer who went into an institution in the States and that also led to a really... was very beneficial in supporting the efforts of deinstitutionalization because it just was completely shocking for people.

ABK: Yeah, I mean, it definitely sounds like it was part of broader revolutions and people's changes in thinking and the **Disability Rights Movement** was a huge part of it, but it wasn't a perfect moment, and it wasn't what people really - in the grassroots - really wanted because we still do have big institutions and I'm wondering... there was a lot of promise behind de-institutionalization but especially particularly for marginalized... very more marginalized populations, that hasn't totally happened.

I'm thinking about institutions again like the CPRI which rebranded itself twice, like they just can't shut down. They have to stay open and be a kind of a place like that, and what forces are at work that have held us back from really seeing through this dream and this ideal of de-institutionalization?

ML: Yeah, so, I think one thing that I always like to note because I am from Manitoba is that in Manitoba, they still have two of the last residential institutions for adults with disabilities in Canada. These are significant facilities that started... that were some of the original institutions for disabled people in Canada. And they still exist and there is no plans to de-institutionalize them. And Saskatchewan just closed their last institution within the last two years. So, we're still seeing the major forms of institutions close, but I'm speaking to why it didn't necessarily

happen.

The 1970s were an interesting time, largely in the 1970s we saw the growth of **neoliberalism** and so what this meant was the government did not necessarily see these institutions as they should be closed for moral reasons, but rather they were very expensive. They were economically super unviable and were very draining on the system, and so they saw that and decided to begin to close these institutions in favour of both **Schedule II institutions**, which are..... **Schedule I** are the really major ones, so the Rideau Regional Centre, the Huronia Regional Centre, and all of the ones that contained over... most of them contained over 1,000 people.

But then there were Schedule II institutions which were largely run by churches and religious organizations and they ran smaller institutions, and so there was this very deliberate shift from it being a public service where it was very well financed because they were financing the oppression of disabled people, but then when it was about financing the liberation of disabled people through community living, that wasn't something they were interested in.

They were interested in trying to make it cost as little as possible.

ABK: Right.

ML: At the same time that people were starting to de-institutionalize, this is really when group homes started to become popularized and so, in... a bunch of things happening at once, but municipalities at the time started to hear about group homes, and obviously did not like them. And so this really resulted in a "not in my back yard" style of thinking where municipalities were very against the growth of group homes. The **Municipal Association of Ontario** did like a bunch of very aggressive lobbying efforts to make it so that group homes couldn't be a thing. And municipalities largely won. They couldn't not have them built, but they could by-law them out of existence, and that is what the Premier of Ontario told them to do. He said 'we can't stop these from being built, but you can regulate them out of town.'

At the same time that they were closing these massive institutions they were supposed to be shifting to community living, but never met those funding needs. So, we see in the 80s some... throughout the 70s and 80s there were actually a few more institutions built in order to decrease the fire hazards that came out quite explicitly, and the overflow that was happening in institutions. Then, we continue to see them being built and then they start throughout the late 90s. That's when they start to shift the population size.

In the 90s ,that's when neoliberalism came to Ontario, and [Ontario Premier] Harris decided that he was going to bring in the 'Common Sense Revolution' and that would mean that families were mostly responsible for their children, while at the same time community living was being forced out of the community. And so we saw this unequal funding model being created and this reliance on group homes that could not exist, and in the original reports in the **Welch Report** and the Williston Report, they say that there is no way that we can de-institutionalize without funding properly, and that if we don't, and we shift to a group home model, that will reinstate the institutional living model. That is essentially the same as creating these large institutions. So, when they do that, they need to have equal funding.

(30:29)

ABK: It's reproducing the large institutions in basically a small setting. Isn't that basically what happens in a group home, because there isn't the kind of freedom you'd have in a group home that you'd have in another alternative such as **Independent Supported Living**, where someone is living in their own apartment in the community? They're in a group home which has many of the same restrictions of a large institution, but it's seen as 'liberating' because it's smaller. But it really has many of the same trappings as the large institution.

ML: Exactly. So, I guess one thing I want to note is that we know that living outside of institutions is possible for disabled people and we know that institutionalization has always been **classed**, and so people from high income backgrounds were able to support independent living for their child in their family home. And that has continued, and so we see that families who are able to fund community supports for their children... they are able to have the **Independent Living Model** or the **Interdependent Living Model** that we could go in forward...

But now what we see is, called **Trans-institutionalization**, so this means 1. We have these group homes which are probably the worst model and most closely resemble the institutional model, but then those are the best case scenario. And we only have... we have the same number of people living in group homes that are in... on the waitlist, and so 9,000 people in group homes and 9,000 people on the waitlist. So then where are those 9,000 people living?

When you begin to determine where they are living, you can see the role of other institutions, not just group homes but, oftentimes, if an adult who is labeled with developmental disabilities is incarcerated they won't be able to leave the carceral setting. They won't be able to be released unless they have access to a group home. They can keep them in the prisons because they do not have a group home to live in because there's... the waitlist is up to 21 years long. That's one form of trans-institutionalization, but then then we also see young people increasingly living in long-term care settings which also have an extensive waiting list. And have absolutely zero supports for adults with developmental disabilities because that's not how they are created and because, that's not who they are geared towards, and that's not who they are going to make a profit off of.

ABK: I'm just going to define for the listeners when we say **Long-Term Care Homes**, we're basically talking about what people think of as a Nursing Home.

ML: Exactly.

ABK: Right?

ML: Yeah. Those long-term care or nursing homes are holding a larger and larger portion of the population of adults labeled with developmental disabilities. And then these group homes are not allowed in many neighbourhoods and continue to have minimum separation distances, so you can't have two group homes close together, because they don't want too many disabled people intermingle... start a revolution or something.

And they don't want that to happen, and so they have these spacings and so group homes then become this total institution because 1. People who live within group homes... generally the group home is positioned to be closer to a **sheltered workshop**, so the only money you'll be making is at a shelter workshop which employ disabled people for under... for a sub-minimum wage. So, you have a low-income level, and then are living perhaps in a suburb, and how can you have access to transit when our transit system is completely broken and when para-transport works once a week, or... so it recreates this, and then also has this surveillance model where, you always have to sign a guest in or you're always being watched or where you're always sharing space somehow.

And this was really emphasized through COVID when they released the guidelines for congregate care facilities that said that 'people who live in congregate care should consider turning their beds so that they are sleeping feet to head with other residents'. If that is the space that people are living in then we know that they are not living in spaces that allow for independence, that allow for autonomy, that allow for decision making, because those are not being guaranteed in group homes .

ABK: Yeah, there isn't really... it's basically the same model of control in the group home as there was within the institution including labour, including being sent to sheltered workshops and working for sub-minimum wages, which is just like they did in the big "I" institutions and the big institutions.

There isn't freedom - They lock the fridges at night. You don't get to choose who you're living with or how you live or when you can come and go, and some people might hear about this and think it's the 'only way', but actually if you look at... down in the United States where they are being more progressive than we are being here in Canada which is so far behind, there are models... the **money follows the person model**, the **independent supported living model**,

there are a lot of successful best practices of getting people to just live in the community and not be caught in these tiny sort of microcosm versions of the big residential institution.

And then you also have the problem, like you're talking about, of the connection with the carceral state. I'm thinking especially for youth, we know that as we have policed the hell out of our schools over the past few decades, kids... more and more kids are getting in trouble for less and less serious offenses and they end up in these sort of quasi-prison like conditions and they end up in a kind of school-to-prison pipeline and in institutions-to-prison pipeline. They prey on parents...

Some of the institutions such as some of the ones that promise to 'reform' the kids, right, and promise to do bootcamp for the kids, places like the CPRI definitely, in my opinion, prey upon parents by saying 'hey, let your kids live here and we can fix your kids for you.'

And it... like I said is *housed in the same space as the former sanitarium and the former asylum, and it's serving the same function*. The kids don't have freedom there, there have been clear human rights abuses, criminal complaints against staff for assaulting the kids that are living there, and things like that, but it's just framed in a different way. It's just with a different type of rhetoric. Now 'we're helping', now 'we're doing mental health', right, but it's in some cases like the CPRI in London, it's the same place that they were doing all of what we had just been talking about. If they move it out of that space, then they might move it into smaller settings like a nine-person group home but it's the very, very similar dynamic where there isn't freedom and there isn't independence.

It is frustrating for me to hear about because, we know when we look down in the US that there are so many models and there is so many ways that they are doing... allowing people with intellectual and developmental disabilities to live more independently but yet in Canada we still have 80% of the federal funds for housing in this sector going towards segregate removed housing, congregate care, like you said on the edge of town... You know, 'The home for the men with autism'. And only less than 20% going towards independent living in the community.

So, I guess my question ...kind of the big question is *why*? If we know it's better for youth and families to get rid of these institutions, why is the government of Canada and the provincial governments, even as they promised that they were de-institutionalizing, why do they keep doing this? Why haven't they been able to break out of that cycle?

ML: Yeah, that's a great question. So, I think... we are really trapped within this **capitalist system** and so under this capitalist model disabled people do not produce as much and thus, are not valid members of society. And thus are deemed to deserve the same rights as people who are producing, and people who are... yeah,... people who are production based. And so, we

really see this in terms of... the production of neoliberalism. So when they say 'OK, so you are disabled, well that's fine we will treat you the same as everyone else, that means you have to do everything yourself.' And so, kind of that shift to equality, where they are like,... 'OK, well if you want to be living on your own, then you have to be living on your own.' There's this complete devaluation of disabled people in every single form of living.

ABK: Sounds like if you can't live on your own then, 'this is what we... all we can offer you'.

ML: Exactly, and...

ABK: There's profit from that system, right? I mean, it wouldn't be... if group homes didn't profit more than independent supported living, we wouldn't have them.

ML: So, yeah. There is also this desire for the non-profit structure, but then there is also this desire that really came out of, you know, the challenging of... Ronald Reagan and the creation of the 'Welfare Queen', so if you're going to require state support then, you should get the worst, the absolute worst because otherwise people aren't gonna want to work and then they'll just be able to live their life.

We see this in like long-term care and psychiatric institutions and hospitals where if you want to have independent living then you have to... to pay for it. Our state services cover this public model, where you live with four other people, but they don't cover having that privacy or having that independence. I also think that it benefits the state to be able to continue to run these institutions because they are able to continue to profit off of the labour of disabled people. And, they don't have to pay for any of... any additional services beyond that what they are giving to the non-profit, and it's this continual shrinking of government regulation of... and growth of the corporate and not-for-profit sector.

ABK: Can we talk for a minute about in Manitoba... I think it was in Manitoba... where the government was looking to close down some large institutions because of human rights and other issues, but there was pressure from **unions** that worked in those institution - Is that right? That they didn't want to lose jobs and what happened with that? What about those kinds of scenarios?

ML: Yeah, so I think that there is this kind of false dichotomy between the left and the right, everywhere, but especially in the provincial government in Canada where we think that these [institutions] only exist because of Conservatives.

But, if you look at what has happened in Manitoba, they were attempting to... investigating looking at closing the **Manitoba Development Centre**. And MGEU, which is the Manitoba

General Employers Union there, developed a very strong campaign about maintaining the institution. And so, then every single political party supported the maintenance of this institution and supported its continual role, because when institutions were built, they were built in small communities that didn't have good economic prospects. These institutions represented a place where people could work and that often and continues to be a problem in rural settings outside of farming, and so they were opposed to that.

Then we saw and we continue to see the NDP [New Democratic Party of Canada] supporting the maintenance of the buildings and we see the NDP supporting the maintenance of the autism model, and it's really not a left-right issue in Canada so much because, I think that all forms of the state are so committed to the institutionalization of disabled people and, if we had disabled people living independently, I think that that would really challenge so many notions of the state, and so many notions of what is good and what is a productive person... what are our goals in society that really, you know, all lead back to that nation building that we were talking about in the beginning, where they have made these efforts for centuries.

That is what Canada was created off of ...this model of the white, emotionally-controlled, sexually-repressed person that so much of disability and disabled people challenge. I think that the maintenance of these institutions, through group homes, through long-term care serves to further that. And then I think also if we really want to go deep, I think that it also serves to enforce another form of eugenics where and... and a form of incarceration that people don't want to challenge. They don't want to challenge that people should be incarcerated at all.

I think that we have to intertwine these conversations together, and then it gets really... overwhelming for people when we talk about de-institutionalization of all forms of carceral settings... when we talk about abolition... but really they are tied together and long-term care, and psychiatric care and group homes and the prison setting all benefit off of each other.

And so, closing down one of them will serve to rattle the walls of another. I think that they really don't want that at all.

(46:08)

ABK: Yeah, I mean, they are so interlinked especially the psychiatric care and what I have the most knowledge about is like psychiatric care for youth and how that's just another pipeline into the prison system and often another form... I mean these kids are being held against their will and against their rights. When, you know, in the case of in a lot of these institutions, they haven't even committed any crime. It doesn't really matter. They have no rights at all. And, it's really shocking to me because there are so many better ways.

But when you look at... I think we can look at the big picture of it and why it exists, [but] when you look even smaller, and you look at like an MPP, why does an MPP, an NDP MPP for example, want so badly to keep a day institution like an IBI centre, an ABA centre, or a place like the CPRI in their community?

And, sometimes it's just really simple... **jobs**... because 'I don't want people to lose jobs cause then people won't vote for me' because like you said, 'I'm in a small community, I'm an MPP of a small community, I'm not willing to let go of the support that I get for maintaining these institutions'... and the moral reprehensiveness of the institutions and even, you know, their willingness to override that and the reason they can override their morals and keep supporting these institutions well past our era of supposedly de-institutionalization.

[This] seems to be because of [as] you mentioned, a dehumanization of the people – the residents themselves that are in the institutions. Until we can deconstruct that, I'm just repeating what you were saying... but until we can deconstruct why people... certain populations are marginalized and placed into these settings [and] the broader picture even going back to that post-war period where 'what's the ideal family'?

Even *families* have to take apart their idea of what the perfect child is. We have to address all those attitudinal barriers before we can get to the kind of... To understand why... why they keep perpetuating the same system even so many decades and years after we've been trying to reform it. It's really something.

ML: It is really something. Yeah, and I think that also, I mean, if we look at the not-for-profit sector, it is huge. It has become a wing of the state because the state decided to dissolve all of those centres and group homes typically do not typically support governments that are going to support them and so, they are really backed by, if you look at the NDP who are supported by **Autism Speaks**... I think that disability has been depoliticised so much in Canadian culture, that it doesn't seem to be a political issue anymore because it's just what it is, supposedly.

ABK: Yeah and that's really in contrast to the US where the Civil Rights Movement and Disability Rights Movement... I mean Disability Rights was part of the Civil Rights Movement in the US and that didn't happen in the same way in Canada where disability rights are just off the radar even now in the 21st century. It's... people don't believe me because they think 'Oh, you're from Canada... like everything must be really progressive there for disabled people', and I'm like 'We're really stuck. We're way behind what's going on in the States.'

ML: Yes! Even like if you look at our most recent legislation that was passed in regards to disabled people, it was **Accessibility For All Canadians Act**, which literally *does not say disability*

in the title at all. And when [parties'] platforms were introduced, no one had a platform that talked about disability issues in the same way that every single... well no, most of the Democratic candidates had a disability platform, and that is *not even something that crosses people's radar* when they do run [in Canada] because there's still this mass disenfranchisement of disabled people.

ABK: Definitely. I want to ask now ... we are really behind in Canada, and we're trying to catch up and there's a lot of good that's being done. I'm wondering for listeners, what we can do as individuals or as rights organizations in Canada to change that landscape, and to put an end - finally put an end to the residential institution era for real, for good. What are your thoughts on that?

ML: Yeah, I think that my thoughts are that we have to begin **living abolition** every single day. So, we have to begin challenging what we think and why we crave independence. What does independence mean to us? And what does [it mean to] go back to the tenets of Disability Justice, and starting to live those? What does an anti-capitalist praxis look like? And what does challenging notions of goodness and worth look like within our families... within our communities? And, why are so many of our communities absent of actual disabled people?

I think that what people can do is start to question what their beliefs are on disability, how their life has been shaped by eugenics in Canada, and what they are going to do about it moving forward. And I think that people haven't really started doing that in a way beyond, 'I'm going to make my group meeting accessible' vis-à-vis saying that there's going to be a ramp. And that, that I think is really like a high bar for people right now, and that's not even getting close to Disability Justice or to abolition of group homes.

Like, that's so far from where we are, but I think that, it really is about starting that reflection of 1. Where are disabled families? Where are they? Why don't I know them and 2. Living that abolition ethic and belief that we believe.

ABK: Yeah, I think so, and one of the missing pieces...that we don't have is a history, real histories and real data about the history and the present day – how people are living, and we have a real dearth of that kind of data and research.

What you're doing with your research around sexual citizenship and around institutions is beginning that conversation. We have to have that history, and we have to have that understanding to be able to *articulate* what the problem is, and really that's the point that we're at in Canada. We're still at the point of articulating the problem and then we begin the journey (which hopefully won't be too long) towards coming towards real solutions, and real justice and human rights.

ML: Yeah, yeah. Absolutely.

ABK: Yeah. So thank you for the work that you're doing and the kind of work that you're doing and the research that you're doing. We'll definitely be sharing links to anything that you're working on and anything that you can recommend for people to read to keep this conversation going.

ML: Oh, I have so much for people to read!

ABK: Great!

ML: It's so nice to talk.

ABK: I know, you too! Thank you very much Megan. It was so interesting.

(Theme song - soft piano music)

ABK: You've been listening to Noncompliant: The Podcast. I'm your host, Anne Borden King. Noncompliant is recorded at MCS Recording Studios, engineered by TJ Liebgott and Nathan Gravette.