

**THE STANDING SENATE COMMITTEE ON SOCIAL  
AFFAIRS, SCIENCE AND TECHNOLOGY**

**STUDY ON ISSUES RELATING TO SOCIAL AFFAIRS, SCIENCE  
AND TECHNOLOGY GENERALLY; FORCED ADOPTION  
MANDATE IN POST-WAR CANADA**

**BRIEF**

**PROVIDED BY THE SALVATION ARMY**

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The Salvation Army wishes to thank the Standing Senate Committee on Social Affairs, Science and Technology for the opportunity to make submissions in the context of this study. The Salvation Army acknowledges the loss and grief felt by those who were impacted by the societal dynamics of the period under review. In the pages that follow, The Salvation Army will seek to present its understanding of the role of maternity homes within the legal and societal framework between 1940 and 1980. The Province of Ontario will be used as an example, as it is The Salvation Army's understanding that other provinces had similar legal frameworks.

### **SUMMARY**

Adoption and child welfare in Ontario were regulated by the Provincial government, who relied on Children's Aid Societies to administer, with the supervision of the courts, the mechanisms related to these areas of responsibility. Maternity homes, which were provincially regulated and funded, had the role of ensuring safe housing and access to health care for single expectant women during a time in their lives when other supports, including that of their families, were not available to them. The family and social circles of the women generally appeared to be instrumental in the women's decisions regarding the plans for their children. The focus of the child welfare system at the time was on the future of the child, with an emphasis on adoption, reflecting widely held societal views. When such views began to change, more supports became available, allowing an increasing number of young parents to choose to raise their children.

## **THE SALVATION ARMY**

The Salvation Army was founded in England in 1865 by William Booth, a London pastor. Booth began his work out of concern for those who were experiencing poverty and addictions in the east end of London. He believed that it was an imperative of Christian faith to address their immediate, practical needs.

Out of the movement that William Booth started in an impoverished area of 19<sup>th</sup> Century London grew the international Salvation Army, a Christian denomination focused on identifying and addressing the unmet needs of people experiencing marginalization in society. Today, The Salvation Army supports people in 400 communities across Canada and in 128 countries, providing services that are specific to the needs of the individuals in each location.

## **THE SALVATION ARMY SHELTER AND SERVICES FOR WOMEN - 1885 TO 1940**

The Salvation Army began its work in Canada in 1882 and quickly became an effective provider of a range of support services. A pioneer in social reform, The Salvation Army's ability to bring about change was strengthened by its structure (which allowed for a quick movement of workers and permitted it to focus resources), and by the latitude that its clergy ('officers') were given to identify local needs and implement solutions that fit that particular context - "to grapple with the local problem in whatever shape it presents itself".<sup>1</sup> The Salvation Army's methods were considered unique and were valued because they closed gaps in the assistance available to people experiencing marginalization.

In the late 1800s, The Salvation Army in Canada identified the provision of health care and shelter to women as an unmet need. As a result, it began opening maternity hospitals and homes called 'rescue homes'. Two such rescue homes were opened in Toronto, one on Albert Street (1886) and one on Esther Street (1889), and they marked the start of The Salvation Army's work in Canada in this area of social services. The homes provided accommodation and health care to women and children living in poverty, some of whom had escaped prostitution, and all of whom had nowhere safe to go. In addition, The Salvation Army sought to improve the circumstances of the residents on a more permanent basis, by finding them work or returning them to their families or communities of friends.

The home on Esther Street eventually became a maternity hospital. By 1896, Salvation Army services for women had reached six provinces; that year, nine rescue homes sheltered 631 women and 277 children.<sup>2</sup> By 1940, faced with an ever-increasing demand for services, The Salvation Army was operating fourteen maternity homes across nine provinces, and multiple maternity hospitals. In the three decades that followed, the number of maternity homes rose to seventeen, five of which were in Ontario.<sup>3</sup>

While in the beginning maternity homes had managed and financed their operations independently, over time the government's involvement through legislation and funding increased. Below is a description of various aspects related to the operation of maternity homes in Ontario in the decades after 1940.

## **MATERNITY HOMES IN ONTARIO - 1940 TO 1980**

### **Registration, Licensing and Review**

The most notable statutes that applied to maternity homes in Ontario during this period were *The Maternity Boarding Houses Act*<sup>4</sup>, and the *Charitable Institutions Act*<sup>5</sup>. By 1940, *The Maternity Boarding Houses Act* already required homes to register under it and comply with its requirements, making them subject to inspection. In 1950, the *Charitable Institutions Act* came into force, establishing inspection and reporting requirements for charitable institutions.

A report prepared in 1960 by the Social Planning Council of Metropolitan Toronto (the "Social Planning Council Report"), noted that Ontario maternity homes were licensed under the *Charitable Institutions Act*.<sup>6</sup> It also noted, at page 29, that Ontario maternity homes were subject to periodic inspection by the Child Welfare Branch of the Department of Welfare. Regular inspections resulted in reports that identified deficiencies and actions required to address them. The physical aspects of the homes were assessed based on specific standards that were found to be met by the maternity homes reviewed.<sup>7</sup>

### **Funding**

In 1958, the Ontario government was required by law to provide grants to maternity homes. The grants were calculated by multiplying the number of residents by the average daily cost (or \$3.30, whichever was lesser) and then deducting the total payments made by municipalities for the maintenance of their residents. The grant was 75% of the remaining amount. The Salvation

Army supplemented those grants by fundraising, and by charging a fee of \$7 to \$10 to women who had the means to pay it.<sup>8</sup> Funding did not include provision for counselling for residents.

The *Child Welfare Act* (which was passed in the mid-1950s and is described in more detail below), allowed for The Salvation Army to have a special arrangement with the City of Toronto, by which it received a *per diem* rate that covered prenatal, hospital and post-natal care for women whose legal residence was Toronto.<sup>9</sup>

With the introduction of the Ontario Hospital Insurance Plan in 1959, medical costs were no longer a concern for homes, as they had been before. Prior to 1959, if the resident was unable to cover the cost of her hospital stay, the Salvation Army home paid the hospital \$24.35 per day for each mother and baby. Covering the costs of the hospital care took priority over covering the costs related to the stay in the maternity home. If the women were not from Toronto, their municipality of residence was charged for their hospital costs. The Social Planning Council Report noted that this practice defeated the possibility of confidentiality for the woman and her family, which was a concern.<sup>10</sup>

Hospital costs could also be covered with the assistance of the father of the child. If the mother chose to sign a declaration of paternity, that could be used to seek financial assistance from him. Court proceedings could be initiated if he did not voluntarily provide the necessary support. The Social Planning Council Report noted that maternity homes overemphasized seeking the father's financial contribution. If a woman decided not to identify the child's father, she was provided with the option of working in a "wage home".<sup>11</sup> Such "wage homes" were not connected to The Salvation Army.

### **Work, activities and other rules pertaining to maternity home stays**

The Social Planning Council Report described work assignments in maternity homes as serving a therapeutic purpose - they were not a substitute for hired help. The work was described as being light, with assignments usually being completed before noon except for those related to the kitchen or dining room. It was noted that work schedules were usually changed weekly.<sup>12</sup>

Visiting privileges were identified as lenient and all but one of the homes allowed the unborn children's fathers to visit on a routine basis, as well as other visitors. Phone calls were allowed. Sewing, crafts and outdoor activities were identified as available in all the homes reviewed. The

School Board offered education for Toronto residents only, and where women's education had been interrupted, the homes had a responsibility to help them continue their school work. The Toronto homes were identified as having chaplains and regularly scheduled church services.<sup>13</sup>

### **Maternity homes intake and medical care**

The Social Planning Council Report specified that women chose which homes they attended. It described intake as being managed by the maternity homes, with decision making regarding admission being based on aspects such as age (younger women having preference) and late in pregnancy (second or third trimester). It confirmed that pre-admission examinations, pre-natal clinic care, delivery services and post-natal care met approved medical standards. It also noted that diet recommendations were followed in the Toronto maternity homes. Medical records were identified as adequate and complete.<sup>14</sup>

With regard to hospitals, the Social Planning Council Report noted that women were generally admitted to wards that were shared with other patients, and that they received the same care as other patients. The quality of the hospital services was identified as high.<sup>15</sup>

### **Other findings regarding maternity homes**

A staff survey undertaken for the development of the Social Planning Council Report identified varying numbers and types of staff across the Toronto maternity homes. It was mentioned in the report that those interviewed appeared sympathetic toward the unmarried mother, interested in the program and non-judgmental.<sup>16</sup>

As for the variations in practice that were present in cases where the children were to be placed for adoption, the Social Planning Council Report noted that the babies were not brought to the hospital ward after birth. They were to stay at the hospital for ten days only but in some cases their stays were lengthier because foster mothers were not available. The young mothers had to see their babies once for the purposes of identification, as required by the Children's Aid Society's policy.<sup>17</sup>

The Social Planning Council Report identified a recommendation that mothers not return to the maternity home after giving birth, as it was believed that a return to this sheltered environment "prolongs anxiety, encourages ambivalence, creates conflict about decision and makes leaving

more difficult".<sup>18</sup> If a mother placed her child for adoption, follow up casework by the Children's Aid Society was generally discontinued.<sup>19</sup>

## **THE PROCESS OF ADOPTION IN ONTARIO - 1940 TO 1980**

In addition to legislation governing the operation of maternity homes, Ontario also had legislation governing the care of the single mother and the adoption process. It specifically addressed the aspects of consent to adoption, the role of provincial representatives and courts, and the role of Children's Aid Societies.

From 1940 until the mid-1950s, the statutes that impacted single mothers were the *Children's Protection Act*<sup>20</sup>, the *Children of Unmarried Parents Act*<sup>21</sup> and the *Adoption Act*<sup>22</sup>. The *Children of Unmarried Parents Act* created a mechanism whereby single mothers could obtain financial support from the father of the child. The *Children's Protection Act* provided a system for the protection of children against cruelty and neglect. The *Adoption Act* created a mechanism for the adoption of children.

With the passing of the *Child Welfare Act* in the mid-1950s, the *Children's Protection Act* was superseded; the *Children of Unmarried Parents Act* and the *Adoptions Act* were repealed and replaced, being incorporated, respectively, in Part III and Part IV of the *Child Welfare Act*<sup>23</sup>.

### **Children's Aid Societies**

Children's Aid Societies ("CAS") were organizations aimed at protecting children from 'cruelty and neglect' that had been approved by the Lieutenant-Governor in Council. Increased governmental involvement, which was apparent in the operation of maternity homes, was also a reality in the context of child welfare and adoption. With the passing of the *Child Welfare Act*, the Province of Ontario secured greater regulatory and financial control over CAS.<sup>24</sup>

In the Ontario Law Reform Commission Study of the Family Law Project (Volume IX) published in 1968, the Commission described CAS as follows (at pages 68 to page 70)<sup>25</sup>:

*"Children's aid societies are organizations charged with the responsibility of administering the Child Welfare Act in their respective areas. They are non-profit, charitable organizations under the terms of their Letters Patent and represent an unusual fusion of administrative principles adopted from both public and private origins. They resemble public agencies in that:*

*(1) they, under the direction of boards of private citizens, are authorized under the Child Welfare Act;*

- (2) *they require the approval of the Lieutenant Governor in Council and may be dissolved on the recommendation of the Minister;*
- (3) *their basic responsibilities and those of their officers are prescribed by legislation;*
- (4) *they have delegated to them provincial responsibility for provincial legislation relating to the welfare of children;*
- (5) *their revenues are largely derived from tax sources;*
- (6) *they are subject to inspection and supervision by the Department of Child Welfare.*

*They resemble private agencies in that:*

- (1) *they are directed by boards of private citizens;*
- (2) *they are incorporated under the Ontario Companies Act;*
- (3) *they derive part of their income from private voluntary sources.”*

The legislation outlined the duties of CAS. An important role of CAS was: to assist single expectant women, many of whom were residents of maternity homes, to plan for themselves and for their children, to inform them of alternatives and their implications, to link single expectant women to department and community resources during the pregnancy and afterwards, to assist parents who had placed children for adoption, to follow through with the transfer of guardianship of children, to collect the information required to finalize adoptions, and to provide follow up services to mothers who had placed their children for adoption as well as to single mothers who had chosen to raise their children.

### **The adoption process - parties involved in plans for the child**

*The Maternity Boarding Houses Act* prohibited maternity homes from inducing residents to place their children for adoption. Section 13 provided that:

*“No person registered under this Act shall advertise that he will adopt a child or children or hold out inducements to parents to part with their offspring, and when any such child is transferred by his parents or is given out for adoption to other persons, such transfer shall be made with the knowledge and consent of the agent or secretary of the children's aid society, or of the Superintendent of Neglected and Dependent Children.”<sup>26</sup>*

This provision remained in force in Ontario until it was repealed in 1971.

A study conducted by Professor Ernie S. Lightman in early 1978 (“Intake at Maternity Homes in Ontario: A Descriptive Analysis”),<sup>27</sup> sheds some light on the decisions of single expectant women regarding the future of their children and what parties had been involved in the decision. The study notes, at page 6, that the average age, at intake, of maternity home clients was 19, “with the modal or most common age 17”, and that 73% of the respondents to the survey were between 15 and 19 years of age. At pages 23 and 24 of Professor Lightman’s report, the author notes:

“Respondents were then asked about their plans concerning the baby. At the point of intake into the home, 51% of the respondents were planning to give the child up for adoption; 37% of the respondents were planning to keep the child while 2% intended to place the child in temporary care with the Children’s Aid Society. Eleven percent of the respondents had other plans.”

“Respondents were then asked who had been involved in this decision concerning the baby and the responses are shown in Table 7. The most frequent involvement would appear to be on the part of the respondent’s mother, but it is interesting to note that no single party was involved in the decisions concerning the baby for as much as 50% of the sample. The respondent’s father and the putative father were each involved in approximately one third of the cases while agencies were involved for 23%; other sources were reported far less frequently.”

At page 25 of Professor Lightman’s report, the following table is included:

<i>Table 7</i>		<i>Involvement in Plans Concerning Baby</i>	
		<i>Percentage of Respondents Reporting Involvement of:</i>	
<i>Putative Father</i>			32
<i>Respondent’s Mother</i>			48
<i>Respondent’s Father</i>			35
<i>Putative Father’s Family</i>			8
<i>Agencies</i>			23
<i>Other relatives</i>			13
<i>Friends</i>			13
<i>Other</i>			5

This information reveals that, when it came to plans regarding the future of the child, those in the mother’s family and social circle, including the father of the child and his family, had an overwhelmingly determinative role, amounting to over 70% of those involved in this decision.

A second study conducted by Professor Lightman, based on the same survey data, found that as far as the women indicating adoption were concerned (compared to the women intending to raise their children), a significantly greater proportion of them were still in school and living with their parents prior to admission into the maternity home, a considerably higher proportion of them were being financially supported in the maternity homes by their parents, and they had a significantly lower incidence of past contact with a social work agency. More of those planning to place their children for adoption were intending to continue their schooling.<sup>28</sup>

**Consent for adoption**

According to the *Adoption Act*<sup>29</sup>, and later the *Child Welfare Act*, an adoption could not take place without the mother’s consent. The court was authorized to dispense with her consent if it

believed that the consent ought to be dispensed with. Where the mother consented, in order to make an adoption order, the court had to be satisfied that the mother had in fact consented and understood that an adoption order would permanently terminate her parental rights.

In the 1960s and 1970s, for the mother's consent to be dispensed with, the court had to be satisfied that it was in the best interests of the child to do so. Once given, consent could be withdrawn in Ontario within 21 days, but only if the court was satisfied that it was in the best interests of the child to allow the withdrawal. Before it could make an adoption order, the court had to be satisfied that the consenting mother understood the nature and effect of the adoption order, and that the adoption order would be in the best interest of the child. The child had to be seven days old before an adoption order could be made.<sup>30</sup> These requirements were effective on January 1, 1959, before the Social Planning Committee Report<sup>31</sup> commented upon the legislation as follows, at page 62:

*“This legislation has had serious implications for the Societies. In the past, the Societies had experimented in placing a few infants in adoption homes directly from the hospital. Because of the new legislation, they are no longer placing children in adoption homes before 28 days after birth. This not only delays planning, but adds a financial burden to the Societies, and in turn, to the tax payers.”*

The legislation mentioned above reveals that, by statute, courts had clearly defined obligations with regard to the issue of consent, and were required to address this aspect carefully before allowing an adoption to be finalized.

### **Alternative supports for mothers**

For much of the period under review, there was a lack of support available for single mothers. There was a lack of social housing and daycares, a lack of job placements and adequate income supports. The absence of adequate social support for single mothers had created an environment where adoption was often dictated by financial considerations, unless the mother's family circle would assist.

### **THE ROLE OF THE SALVATION ARMY**

The Salvation Army had, long before 1940, provided shelter to women and their children who had no alternative. However, after 1940, many young women with families that did have the resources to support them came to The Salvation Army.

During the period under review, societal attitudes created the impetus for single expectant women to be housed away from their communities. The response of families to a pregnancy reflected the prevailing view that giving birth to a child in such circumstances would have a stigmatizing effect on both the mother and the child. The young women were sent away to maternity homes, to ensure confidentiality around the pregnancies and confidentiality around the plans for their children. The women's family and social circles appeared generally to be instrumental in the making of those plans.

The Provincial government licensed and supervised maternity homes, and provided them with partial funding. The Salvation Army's role in this context was to ensure safe housing with continuous adult supervision during pregnancy, and to provide health care in hospitals during labour, delivery and immediately afterwards. The Provincial government used the networks of homes created by organizations like The Salvation Army to serve the women but it did not assign a role to The Salvation Army in the adoption process.

CAS had the mandate to administer, under the supervision of the courts, the child welfare and adoption mechanisms created by the government of that day, who controlled those provincial mechanisms through its oversight and regulation of CAS. Within those mechanisms, one of the responsibilities of CAS was to manage the cases of maternity home residents. During the period of review, the focus of the child welfare system was on the future of the child with an emphasis on adoption. Societal prejudices and attitudes ultimately drove these mechanisms in that direction, fueled by the attitudes and views of the family and friends of the young women.

Adequate supports to assist a single young mother raise her child were not evident until later. As societal views began to change, more government-funded services and social housing were made available to single parents as a result of organizations like The Salvation Army advocating for these expanded services. The percentage of women choosing to raise their children increased. The Salvation Army was a leader in shifting focus from providing residential services to providing high-school classes, day programs, life-skills programs, child daycares and other family-centered support and information for young parents. These types of programs continue to be offered by The Salvation Army today.

As for the Toronto home on Esther Street, where social services for women were provided in the early days of The Salvation Army in Canada, after it was turned into a maternity hospital in 1905, it was moved to Church Street in 1909. Today, the Toronto Grace Health Centre stands in its very place, an oasis in the middle of the city, offering access to palliative care, post-acute care rehabilitation and complex continuing care. After more than a hundred and thirty years of service in Canada, The Salvation Army remains true to its model of seeking to develop services in areas where unmet needs still exist.

### **THE RESPONSE OF THE SALVATION ARMY**

It is with great sadness that The Salvation Army listens to the accounts of mothers who felt that they had no alternative but to place their children for adoption.

The Salvation Army regrets the prejudices and harsh attitudes of a society that led families, friends and others to convince young mothers that they must place their children for adoption. The Salvation Army regrets the absence of adequate support programs that would have provided mothers with the opportunity to ignore societal pressures and raise their children.

The Salvation Army has never sanctioned the denial of a person's dignity or the subjugation of anyone to coercion, intentional misinformation or a lack of compassion. In particular, The Salvation Army has never supported the deliberate breaking of, or any attack on the bond between a mother and a child. Such views and actions, regardless of who expresses them, run contrary to the spirit, mission and heart of The Salvation Army, which William Booth captured when he wrote:

“While women weep, as they do now,  
I'll fight  
While little children go hungry, as they do now,  
I'll fight  
While men go to prison, in and out, in and out, as they do now,  
I'll fight  
While there is a drunkard left,  
While there is a poor lost girl upon the streets,  
While there remains one dark soul without the light of God,  
I'll fight-I'll fight to the very end!”

**William Booth**

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- <sup>1</sup> L. Dougall, "A Stranger's Impressions" in *Sin – Chains Riven, A Description of Women and Children's Social Work in Canada, North West America and Newfoundland* (The Salvation Army, 1897) at p. 30.
- <sup>2</sup> B. J. R., "Disappointed Here - Accepted There" in *Sin – Chains Riven, A Description of Women and Children's Social Work in Canada, North West America and Newfoundland* (The Salvation Army, 1897) at p. 43.
- <sup>3</sup> Salvation Army Disposition of Forces and Yearbooks 1940 to 1970.
- <sup>4</sup> *The Maternity Boarding Houses Act* was first enacted in 1897 by 60 Vict. c. 52, as *An Act for the Protection of Infant Children*. The coming into force of that Act in any municipality was conditional upon its adoption by the by-law of that municipality, and where it was so adopted it superseded the earlier Act for *The Protection of Infant Children*, R.S.O. 1887, c. 209. The 1897 Act appeared in Part II in R.S.O. 1897, c. 258, and R.S.O. 1887, c. 209 appeared as Part I, the complete Act being entitled *An Act to Regulate Maternity Boarding Houses and for the Protection of Infant Children*. Part II of the Act, as appearing in R.S.O. 1897, was re-enacted in 1912 by 2 Geo. V c. 60 under the title *The Maternity Boarding Houses Act*. It was amended twice - once in 1940 and again in 1964 - before being repealed in 1971. *The Maternity Boarding Houses Act*, R.S.O. 1937, c. 311.
- <sup>5</sup> *The Charitable Institutions Act* appeared in 1950, and was consolidated in 1960, 1970, and 1980.
- <sup>6</sup> Social Planning Council of Metropolitan Toronto (1960), *A Report on Maternity Homes in Metropolitan Toronto* prepared by the *Social Planning Council of Metropolitan Toronto*; Toronto, Ontario at p. 29.
- <sup>7</sup> *Ibid.* at p.iv.
- <sup>8</sup> *Ibid.* at p. 25.
- <sup>9</sup> *Ibid.* at p. 26.
- <sup>10</sup> *Ibid.* at page 27.
- <sup>11</sup> *Ibid.* at pages 27 and 28.
- <sup>12</sup> *Ibid.* at page 48.
- <sup>13</sup> *Ibid.* at pages 46-49.
- <sup>14</sup> *Ibid.* at pages 50, 37, 38.
- <sup>15</sup> *Ibid.* at pages 70, 71.
- <sup>16</sup> *Ibid.* at pages 33, 34.
- <sup>17</sup> *Ibid.* at page 70.
- <sup>18</sup> *Ibid.* at page 43.
- <sup>19</sup> *Ibid.* at page 64.
- <sup>20</sup> *The Children's Protection Act* finds its origins in various provisions of 51 Vict. c. 40 (1888); 53 Vict. c. 76 (1890); 56 Vict. c. 45 (1893); and 60 Vict. c. 53(1897). Sections 1, 5, and 7 of 51 Vict. c. 40; ss. 1-15 and 17-31 of 56 Vict. c. 45; and s. 5 of 53 Vict. c. 76 were consolidated as R.S.O. 1897, c. 259, while 60 Vict. c. 53 was consolidated as R.S.O. 1897, c. 262. In 1908, by 8 Edw. VII c. 59, the first of these, with amendments, was again consolidated. In 1913, by 3 & 4 Geo. V c. 62, the 1908 Act (8 Edw. VII c. 59) was repealed and re-enacted in amended form, and ss. 2, 4, 6(1), 11(3), and 14 of R.S.O. 1897, c. 262, were incorporated in the new Act. That Act remained the same in the R.S.O. 1914, c. 231, but was again repealed and re-enacted by 1927, c. 78, and remained in this final form, subject to minor amendments, until superseded by *The Child Welfare Act* in 1954.
- <sup>21</sup> *The Children of Unmarried Parents Act* was enacted in 1921. It was superseded by 1927, c. 51, *The Children of Unmarried Parents Act*, 1927. The Act was repealed and replaced by 1954, c. 8, *The Child Welfare Act*, 1954. The Act was repealed and replaced by 1984, c. 55, *The Child and Family Services Act*, 1984.
- <sup>22</sup> This Act was first enacted by 1921, c. 55, *The Adoption Act*, 1921. It was superseded by 1927, c. 53, *The Adoption Act*, 1927. The Act was repealed and replaced by 1954, c. 8, *The Child Welfare Act*, 1954. This Act was superseded and replaced by 1984, c. 55, *The Child and Family Services Act*, 1984.
- <sup>23</sup> *The Child Welfare Act*, R.S.O. 1960, c. 53, subsequently *The Child and Family Services Act*.
- <sup>24</sup> Richard Barnhorst, Laura C. Johnson, *The State of the Child in Ontario* (Toronto: Oxford University Press, 1991) at p. 64.
- <sup>25</sup> Ontario Law Reform Commission (1968), *Study of the Family Law Project: Volume IX Children* prepared by the *Ontario Law Reform Commission*; Toronto, Ontario at p. 68 -70.
- <sup>26</sup> *The Maternity Boarding Houses Act*, R.S.O. 1937, c. 311, at s. 13.
- <sup>27</sup> Ernie S. Lightman, *Intake at Maternity Homes in Ontario: A Descriptive Analysis* (Toronto: University of Toronto, Faculty of Social Work, circa 1978).
- <sup>28</sup> Ernie S. Lightman, *Intake at Ontario's Maternity Homes: Those Planning to Keep The Child and Those Intending to Give for Adoption* (Toronto: University of Toronto, Faculty of Social Work, 1979) at pages 4, 7, 8 and 12.
- <sup>29</sup> *The Adoption Act*, R.S.O. 1937, c. 218, at s. 5(1).
- <sup>30</sup> *The Child Welfare Act*, R.S.O. 1960, c. 53 at s. 66(2).
- <sup>31</sup> *Supra* note 6, at p. 62.