



In The Beginning

CAOT FROM 1926-1939

By Judith Friedland, Isobel Robinson and Thelma Cardwell

By the time CAOT came into existence in 1926, occupations had been in use as treatment in tuberculosis sanatoriums and in mental hospitals for several decades. However, the nucleus of our discipline only began to take form with World War I when emergency courses for Ward Aides (also known as "Occupation" Aides) were organized in Toronto and Montreal by the Department of Soldiers' Civil Re-establishment (SCR). A six-week program, later extended to three months, began in 1918 at the University of Toronto (U of T) in the Faculty of Applied Science and Engineering under Professor H.E.T. Haultain who was the Vocational Officer for Ontario. Our military origins were reflected in the uniforms worn by the aides. Haultain remembered that Captain Stanley Fryer designed a uniform that was green with some red, to replace the "horrible" brown ones sent by Ottawa. He said, "It was bright. It had military cut. It attracted the sick man. It was not hospital, and it was not discipline. It worked. It suited those days" (Haultain, 1945, p.58). Mary Black, who went from her home in Nova Scotia to Montreal's McGill University for its three-month course in 1919, added to Haultain's description



noting that "On the left hand top pocket we wore a red embroidered SCR shield. A brown leather belt completed the outfit" (Black, unpublished letters, 1986).

More than 300 women from the 1918-19 classes spread out across Canada to work in Military Hospitals. At the end of World War I, the ward aides were demobilized and moved to mental hospitals, tuberculosis sanatoriums, and workshops in community settings. When therapists began to work in general hospitals in the early 1920s, a prominent surgeon, Dr. Alexander Primrose (1923), wrote that "the day is not far distant when every large general hospital will consider a department of this sort as one of the essential parts of its equipment" (p.292). A few years later a newspaper column in the Toronto Daily Star (January 29, 1927)



*S.C.R. Ward Aide Training Group, Montreal, June - September, 1919.
 Top: Mary Black, 1920*

suggested that the profession's most outstanding success could be found at a mental hospital in North Battleford, Saskatchewan where 90% of its 640 patients were given occupational therapy.

In the 1920s, occupational therapists organized themselves to promote their work and to support one another. The first provincial organizations, the Canadian Society of Occupational Therapists of Manitoba and the Ontario Society of Occupational Therapists (OSOT) were founded in 1920. *continued>*

*Canadian Association
of Occupational
Therapists' Annual
Convention.
Montreal, 1938*



The Manitoba Society was very strong. Its members raised funds to support a curative workshop in the Builders' Exchange, and it held a public meeting to form a committee of citizens to promote its work. However, it was small in numbers and unfortunately was soon forced to disband. A story in the *Winnipeg Evening Tribune* (July 14, 1923) noted that "occupational therapists [sic]" were working with the mentally ill at Brandon, Winnipeg, and Selkirk. Edith Griffin of Winnipeg spoke publicly about the economic contribution occupational therapy could make to society (Griffiths, 1922) and she was among the first to urge the creation of a national organization (Driver, 1968).

Soon after its founding, the Ontario Society established an Advisory Board of highly influential people which included the Dean of the Faculty of Medicine at U of T, Dr. Alexander Primrose, and the President of the University, Sir Robert Falconer (Dunlop, 1933). These two men helped OSOT with a key undertaking which was to found the occupational therapy course at the University of Toronto. Primrose made the request to the University for a two-year course and the Senate (with Falconer as its chair) gave its approval. The first class enrolled the following September with Florence Wright, a graduate from one of the 1918 classes, in charge.

CAOT was formed in 1926. Its first annual meeting was held on October 16, 1930 and on April 17, 1934, CAOT was incorporated by Letters Patent under Dominion Charter. The founding members were: Goldwin Howland, W.J. Dunlop (Director of the Department of Extension, U of T), Dr. Robert E. Gaby, who had taught in the first U of T course, and two ward aides who had graduated from the course, Helen Mowat and Kathleen deCourcy O'Grady. Affiliated members were OSOT, the Quebec Society of Occupational Therapy and the Toronto Association of Occupational Therapy. Goldwin

Howland, a prominent Toronto neurosurgeon became CAOT's first president.

Occupational therapists took on many pioneering roles in those early years. In 1927, Jean Hampson was appointed by the Toronto Board of Education to develop a program for handicapped children in a public school; in 1933, Agnes Mark went to Shanghai to set up its first occupational therapy program; and Helen LeVesconte was appointed as Consultant in Occupational Therapy for Ontario's Department of Health. Also in 1933, Amy deBrisay went to Edinburgh, Scotland to establish an occupational therapy department at the Astley Ainslie Institute. In 1934, Mabel (McNeill) McRae continued the work there and also designed the building for the new department. By 1934, Howland reported that there were therapists in all the provinces except the three maritime provinces, that they could be found in 'outdoor departments' of general hospitals, and that aides in mental hospitals were following up the treatment of discharged patients (Howland, 1934). By 1936, occupational therapy was in seven hospitals in Quebec and several therapists were doing 'field service' work, that is, work in the community. The Montreal Industrial Institute, a curative workshop and occupational therapy at Verdun Protestant Hospital were already well-established (University of Toronto Monthly, 1936).

Although enthusiastic and very positive statements about the 'proven' value of occupational therapy were made to promote the profession (Howland, 1933a; Primrose, 1925), the importance of research was clear even at this early stage. Norman Burnette (1923/1986), who had organized the curriculum at U of T in 1918, noted that improvement was brought on by a combination of influences and asked, "what then is the proportionate value of occupational therapy as one of the factors in the equation?" (p. 8, fn). Jeanne Perigoe, a 1931 graduate, pointed out that occupational therapy could



*Dr. Goldwin Howland
CAOT's First President*

not advance, or even be considered, as a profession until data were accumulated "to form a scientific basis for more efficient treatment in the future" (Perigoe, 1935, p.120).

An interesting aspect of practice in the 1920s and 1930s was that charitable groups (most of which had few, if any, occupational therapists as members) raised funds for occupational therapy programs. One particularly strong group was the Toronto Association of Occupational Therapy (TAOT) which formed in 1922. It ran street fairs, sales, dances, and theatre nights to fund the Toronto Occupational Therapy Curative Workshop, which it administered, and to fund treatments for those without means. Anticipating the teamwork yet to come, TAOT hired a physiotherapist after deciding that it needed both occupational therapy and physical therapy to make their Curative Workshop a success (de Courcy O'Grady, 1933). The Imperial Order of the Daughters of the Empire (IODE) and the Junior League were among others that provided support with the latter group financially supporting occupational therapy programs at Toronto's Hospital for Sick Children and the Vancouver General Hospital (no author, CJOT, 1933).

Helen LeVesconte was certainly one of occupational therapy's early pioneers. She thought that both vocational training and industrial therapy programs should be overseen by occupational therapists, was in favour of sheltered workshops but thought they should be called community centres, and thought clinic workshops should maintain contact with newly discharged patients to help them readjust and develop tolerance for work. Of interest also was her idea that the course in occupational therapy be lengthened "to a four-year degree course, combining with it the course in physiotherapy" (LeVesconte, 1935/1986; p. 12).

Goldwin Howland was by all accounts CAOT's most fervent champion in the early years. On reflecting back to the

profession's geographical origins, he noted that from the "tree's trunk" (in Toronto), there were initially five "boughs" (i.e., occupational therapy programs), in Edinburgh (Scotland), Montreal, Hamilton, Windsor, and Vancouver, and that by 1939 there was "a magnificent orchard, extending from Saint John, New Brunswick through all the provinces of the Dominion to British Columbia" (Howland, 1939/1986; p.17). Howland promoted the idea of an organizing secretary who could travel throughout the country co-ordinating the work so that "the information ... in one Centre can be used in the development of a newer one" (p.17). He wanted to publicize the profession to those in power and sent the first issue of the *Canadian Journal of Occupational Therapy (CJOT)* to over 700 institutions, to entire medical staffs and management boards where occupational therapy was already established, and to 20 or 30 more where it was felt there was room for development (Howland, 1933b).

By 1929, employment was decreasing as the Depression took hold across the country and in 1930 the educational program at the University of Toronto was threatened. Its funding was tied to enrolment and CAOT, knowing the lack of jobs, could not reconcile taking in the number of students required to maintain the university's support (Howland 1933b). In 1932 the course was suspended for two years and when it resumed in 1934, it was under the direction of Helen LeVesconte. Meanwhile, unemployed therapists took on voluntary work in the hope that permanent work would follow. Driver (1968) noted, however, that in 1936, the membership was advised "to limit this voluntary-service method of indoctrination, to six months, lest the lucky institution expect to retain the services of the occupational therapists on a *gratis* basis" (p.56).

Until late in the 1930s, there was no office or office staff for CAOT and all of the work was done by the members on a



*Ward Occupation, WWI
Veteran's Hospital*

volunteer basis. One task was to maintain a registry of therapists for the "protection of the properly qualified aides who [were] members of the Association" (Dunlop, 1933, p.10). After much lobbying, the Association received a grant which allowed it to have a central office and in 1939 Ethel Clarke Smith, an occupational therapy graduate from 1930, was hired as its Executive Consultant. Her job included travelling across the country and developing links among therapists – just as Howland had envisaged. She also interviewed candidates and recommended appointments for all job openings listed with the registry. The title, Executive Consultant, was retained until 1972 when it changed to that of Executive Director. In 1932, CAOT considered producing a textbook on occupational therapy but decided to launch a journal instead. The first issue of *CJOT* was published in September, 1933, with an insignia by Fryer (who had designed the first uniforms) and the motto *per mentum et manus ad sanitatem* ("through mind and hand to health") on its cover. *CJOT* continued as a quarterly until 1937 when, due to financial difficulties, the number of issues was reduced to two, and the journal amalgamated with *The Bulletin of the Canadian Physiotherapy Association*, to become the *Canadian Journal of Occupational Therapy and Physiotherapy* (Robinson, 1983). In 1939, the Journals separated and *CJOT* continued on its own. In that same year, a single-page document, entitled *The Newssheet* was also published. From that small beginning came *The Newsletter*, then *The National*, and finally the present publication, *Occupational Therapy Now*.

In 1939, CAOT, now representing close to 1,000 therapists across the country, offered its services for the injured soldiers of World War II. Dr. Howland sent messages to the Prime Minister of Canada, the Minister of National Defence, and the Minister of Health for Ontario and at the same time requested the Department of Defence to consider placing occupational therapists not only in Military Hospitals in Canada but also overseas. A profession established during an

earlier war by a small group of dedicated pioneers, and now more fully grown, was ready to contribute again.

*Watch for our continued history
in the March Issue of Occupational Therapy Now*

About the authors...

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