

BRIEF HISTORY OF MINNESOTA'S MENTAL RETARDATION INSTITUTIONS

In his annual report for 1877, J. L. Noyes, Superintendent of the Minnesota Institution for the Deaf and Dumb and the Blind in Faribault noted:

"The existence in the state of quite a class of children of weak minds... They are not reached by the public schools or any of the state institutions...where, as a rule, their condition is soon determined and then they are returned to their homes, doomed to a life of ignorance and imbecility. This ought not so to be. 'Ought not,' for schools and institutions of learning are based on the principle that all human beings are capable of improvement, and even the poor imbecile is not an exception to this rule, and he has a right to the means of improvement; and it is the duty and for the interest of the state to see that these means are provided...In their behalf and that of their parents, and in behalf of the rights of a common humanity, I ask that something be done for their improvement."

In response, the 1878 Legislature authorized the Board of Directors of the above institution to establish an Experimental School for Imbeciles. Dr. H. M. Knight, founder and Superintendent of the Connecticut School for Imbeciles, was consulted in June, 1879, and "superintended the organization and opening of the school until his son, Dr. Geo. H. Knight, took charge...in September, 1879". The Board rented the Fairview House in Faribault and in July, 1879, received nine boys and five girls from St. Peter State Hospital, Eight others were received from St. Peter and Rochester in the next year and a half. Applications for admission were numerous. Reports of improvement in the students were inspiring. The Board of Directors, Superintendent, and Commission of Medical Examiners of the Hospitals for the Insane recommended that the School be made permanent and that \$25,000 be appropriated for building and organizing "an institution comprising both an educational department for imbeciles and a custodial department for idiots."

What is now (after a succession of name changes) the Faribault State Hospital thus developed as the first organized Minnesota effort to treat the mentally retarded separate from the mentally ill, and to do so in the context of a special school. Within two years, Dr. Knight was recommending expansion of-"the school to accommodate "idiots" and "epileptics" whose applications for admission were being turned down as the school concentrated on the most hopeful cases. The original building was extended several times and housed about 350 before a second building was opened in 1892-93.

In 1885 Dr. Knight was succeeded by Dr. A. C. Rogers, who, in 32 years of superintendency, was one of the most innovative mental retardation specialists in the county. He established a "farm colony" in 1890; initiated (1896) a training program for attendants and nurses; employed the first psychologist (A. R. T. Wylie, Ph.D.) in any institution for the retarded (1898); established an "epileptic colony" (first called "The Retreat") in 1900; established a research department in 1910 under F. Kuhlmann, Ph.D.; engaged in considerable genetic research; and edited the Journal of Psycho-Asthenics (now the American Journal of Mental Deficiency) for 20 years.

Meanwhile the population continued to increase: 303 in 1890, 797 in 1900, 1260 in 1910, 1709 in 1920. In June, 1925, a new Minnesota Colony for Epileptics (now Cambridge State Hospital) received its first 45 residents from Faribault. In 1945 the State Public School at Owatonna, previously caring for dependent or neglected children, was converted to an institution for "high-grade" feebleminded children. It was eventually (1954) to have 575 students. Also in 1945 an Annex for Defective Delinquents was established at the St. Cloud Reformatory for Men, with the transfer of 52 men from Faribault. In 1951 a cottage at the Women's Reformatory in Shakopee was developed as a unit for 30 small children. In 1955 the Ramsey County Preventorium became the Lake Owasso Children's Home. It was operated as an annex to Faribault until 1961, when administration was transferred to Cambridge.

By 1958, when the Brainerd State (School and) Hospital opened, there were over 5200 residents in state facilities. By 1962 the number had increased to 6565. Faribault had reached its high-water mark in 1955, with 3355; Cambridge attained 2107 in 1963; Brainerd would reach its high in 1966, with 1371.

Throughout this 80-year period, Minnesota's program for its mentally retarded citizens was concentrated, with only a few isolated exceptions, in its residential institutions. But while institution populations appeared to be increasing without end, other events during the 1950's and early 1960's presaged a new era. A changed cultural climate favored habilitation of the retarded. The development of special education and day activity programs, and more careful screening of the waiting list for institution admission began to stem the flood of admissions. The opening of a third major institution at Brainerd was fortunately accompanied by a decision to regionalize the state MR program. Residents transferred from one facility to another were often found to be capable of living and working in or near their home communities. Many of the more mildly retarded were discharged to live with relatives or independently. This induced still further development of community alternatives to institutionalization. The opening of several large private facilities between 1963 and 1967 helped produce a discharge rate at least double the earlier rate. Institution populations declined: to 6276 in 1965, 4589 in 1970, 3517 in 1975.

Further regionalization was accomplished beginning in 1968. Advances in the treatment of mental illness produced a rapid emptying of state hospital beds, which were then converted to mental retardation facilities. The dates of such conversion and the maximum populations of the facilities were:

St. Peter S.H. (Minnesota Valley Soc. Adaption Center)		1968	387
Hastings S.H. (Residential Opportunity Center)	1963		68
Rochester S.H. (Rochester Social Adaptation Center)	1968		181
Fergus Falls S.H. (Regional Retardation Center)	1969		329
Moose Lake S.H. (Skills Development Center)	1970		167
Willmar S.H. (Glacial Ridge Training Center)	1975		157

At the same time older facilities were being phased out, at the dates indicated:

The recent changes in Minnesota institutions are not limited to places and numbers. Prior to 1960 mildly and moderately retarded persons constituted 70% of the residents; in 1975 only 15% were the less disabled. The greatly reduced populations, Legislative concern for improved staffing, and new standards of care and habilitation have brought about a high degree of individualized treatment. With reduced numbers there have also been vastly improved environmental conditions. Once more, as nearly 100 years ago and despite many negative practices in the past, our institutions for the retarded recognize that "schools...are based on the principle that all human beings are capable of improvement, and even the poor (retarded person) is not an exception to this rule, and he has a right to the means of improvement,"

Arnold A. Madow