COERCED STERILIZATION AND EUGENICS IN CALIFORNIA: HISTORICAL SUMMARY AND THE NEED FOR ACTION

Prepared by the historical subcommittee of the Coalition to Address California's Eugenic History

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For much of the twentieth century, California was at the forefront of eugenic ideology and practices in the United States, and holds the dubious distinction of being the state with the highest number of eugenic sterilizations performed under the authority of law. Of 60,000 such procedures performed in 32 states with sterilization laws on the books, 20,000 took place in California. Across the nation, most victims were vulnerable subjects held in state institutions during an era characterized by discriminatory attitudes and policies towards the poorest social classes, ethnic and racial minorities, and those diagnosed with disabilities. Following a rationale of human betterment through selective breeding, eugenicists and their allies in the domains of government, medicine, and social welfare identified these kinds of vulnerable subjects as biologically or reproductively “unfit” and as ideal candidates for surgical sterilization.

Notwithstanding a gubernatorial apology in 2003 for California's shameful history of eugenic sterilization, the state has not adequately or honestly confronted how and why these injustices happened, nor discussed how to commemorate and remember these sorrowful chapters in our past, nor explored how we can make sure that these kinds of systemic violation of human rights do not happen again. Given that California is a leader in research and services related to human genomics and assisted reproductive technologies, including the voter-approved bond-funded California Institute for Regenerative Medicine, it is incumbent on the state and its leaders to grapple with how the eugenic past influences the genomic present and future.

As representatives of organizations concerned about reproductive and disability rights and racial justice, and as historians and writers who have investigated the history of eugenics, we seek recognition and justice for the thousands of people who were victimized by coerced sterilization and castigated as biologically inferior, first in the name of eugenics and then family planning. We call upon our government, educational system, and communities to begin a conversation about how to do justice to the past.

Furthermore, even though eugenic sterilizations in California state institutions slowed significantly in the 1950s, coerced sterilization continued to occur, notably in the case of Mexican American women subjected to nonconsensual
tubal ligations at USC-LA County Hospital in the late 1960s and 1970s. More recently, illegal coerced sterilizations have been documented in California prisons in recent years. Other episodes of coerced sterilization in prisons and in the offices of private doctors have yet to be systematically studied.

Governor Gray Davis apologized for California's state-sponsored sterilization law in 2003, and earlier, in 1979 the law was repealed by the state legislature. Yet most Californians are aware of the key roles played by a number of influential California institutions and individuals in the twentieth-century eugenics movement.

Among the states that enacted eugenics laws permitting coerced sterilization, North Carolina has done the most to recognize its legacy of eugenic ideology and practices, including the recent introduction of a bill to provide reparations for victims of sterilization abuse in the state. Unfortunately, recent reports of sterilization abuse in U.S. prisons, and in countries including China and Uzbekistan, demonstrate the continued importance of efforts to ensure reproductive justice and human rights at home and across the globe.

These historical and contemporary abuses in the name of eugenics, together with their implications for the challenges raised by contemporary human genomic and assisted reproductive technologies, argue for a comprehensive effort to remember, record, and reflect on California's eugenic legacy.

**California's Eugenic Sterilization Law**

California enacted a eugenic sterilization law in 1909. It provided for sterilizing inmates of state hospitals for the insane and the Sonoma State Home for the Feebleminded, as well as convicts in state prisons, when “such procedure is for the physical, moral, or mental welfare of the inmate.” The statute was replaced with a broader law in 1913, and widened further in 1917 to allow sterilization of “all those suffering from perversion or marked departures from normal mentality or from disease of a syphilitic nature.”

Eugenic sterilization in California began as an experiment in the 1910s and grew into an established policy in the 1920s, peaking in 1939. Well into the 1940s, the Golden State’s per capita rate was among the highest in the nation. State-sponsored sterilization slowed only in the early 1950s when the law was amended to require more oversight.

While California's eugenic sterilization law was in force, more than 20,000 sterilizations were performed at both state psychiatric institutions and homes for the “feebleminded.” The Patton, Sonoma, and Stockton hospitals carried out the greatest number, including over 5,000 at the Sonoma facility, largely due to the zealous efforts of Dr. Fred Butler, its superintendent from 1918 to 1944, who himself performed 1,000 sterilizations. Colleagues proclaimed Butler "a true crusader." Many applauded his work: "To California must be given the credit for making the
most use of her sterilization laws,” said Harry Laughlin, nationally known eugenicist and superintendent of the Eugenics Record Office. “The history of the application of these statutes shows an honest and competent effort to improve ‘the racial qualities of future generations.’”

A facility’s medical superintendent, in consultation with members of the Commission in Lunacy or the Department of Institutions, had ultimate power to order that a state hospital resident be sterilized. Family members or legal guardians had little power. Butler sometimes wanted parental consent anyway, and obtained it by claiming that release was contingent on consent for the procedure, a tactic that proved successful and was admired by his peers.

Women represented only a slight majority of those sterilized at Sonoma State Hospital, but records reveal particular concern about female sexual behavior. Many women were institutionalized because of their perceived “sexual delinquency,” and sterilized for the same reason, while the sterilization of men was commonly described as for their own “benefit.”

Records also reveal that although the majority of those sterilized in California state hospitals were white, Mexicans and Mexican-Americans made up an increasingly disproportionate percentage as the years passed. In the first half of the 1920s, 15 percent of those sterilized were youth of Mexican origin; by the second half of the 1930s, that number was 21 percent. Adding African Americans, Native Americans, Chinese, Japanese, and Puerto Ricans who were sterilized in state hospitals, the figure rises to 25 percent.

California’s Pioneering Role in the Twentieth-Century Eugenics Movement

At its core, twentieth-century eugenics was a belief that heredity both determined and explained social inequality. Influenced by developments in genetics, medicine, and public health, it was a politically and ideologically diverse movement. It was endorsed by Fabian socialists in England and racial scientists in Nazi Germany; linked to birth control and progressive economic reforms in Denmark, to pronatalist policies in France, and to racial policies against itinerant gypsies in Sweden; an expression of Fascist ideology in Germany and Argentina, and of cultural hybridity in Mexico; and closely associated with the sterilization of those identified as “feebleminded” and “socially inadequate” in Germany, Sweden, Denmark, and the United States.

The American eugenics movement included some of the most vociferous proponents of racist social engineering. Between the world wars, California was a hotbed of eugenic activism, much of it virulently racist and directed at Mexicans likely due to their increasing numbers in the state. From its headquarters in a Pasadena think tank with the Orwellian title of the Human Betterment Foundation, to Sacramento’s Eugenics Society of Northern California and San Francisco’s Commonwealth Club, leading academics and civic activists promoted coerced
sterilization of the “socially inadequate,” nativist immigration policies, and educational tracking, all based on racist assumptions about “Nordic” superiority.

In the early 1930s, California’s leading eugenicists forged a mutual admiration society with their counterparts in Nazi Germany. One publicly defended the Nazi regime’s “honest yearnings for a better population.” Professors from the California Institute of Technology and the University of Southern California worried about the high birthrate among Mexican “peon type” families. In Los Angeles, the Institute of Family Relations vetted young couples’ biological compatibility for marriage.

The proponents of eugenics were not obscure cranks but the best and brightest representatives of the small elite that dominated California politics. The Golden State’s leading civic reformers of the 1920s, including Sacramento banker Charles M. Goethe, Nobel Prize-winning physicist Robert Millikan, and real estate tycoon Ezra S. Gosney, lobbied nationwide for a eugenics agenda. Enterprising academics and professionals, including Stanford’s David Starr Jordan, biologist Paul Popenoe, and psychologist Lewis Terman, backed by government support and corporate philanthropy, actively participated in campaigns for “human betterment” through applied biology. Four members of the prestigious Huntington Library’s board of trustees were supporters of the Human Betterment Foundation.

**Coerced Sterilizations in the 1960s and 1970s**

In the 1950s and early 1960s, physicians, social workers and members of eugenic boards in a number of states, especially North Carolina, exploited existing eugenic statutes to sterilize poor black women with the specific intention of reducing the numbers eligible to receive public assistance. Some physicians performed “Mississippi appendectomies,” or the secret sterilization of poor black women who entered hospitals for surgeries like cesarean sections and appendectomies, and left, unknowingly, without their uteruses.

In the late 1960s, the development of federal family planning and the legitimization of voluntary sterilization as birth control intersected to create an environment conducive to another new pattern of coerced sterilization: forcing women to consent to unwanted surgeries. Some physicians viewed sterilization as a solution to poverty, illegitimacy, and overpopulation, and scalps as tools of public policy. Federal family planning funded these coerced sterilizations and allowed the practice to spread from the South to the rest of the country. The existence of signed consent forms allowed abusive doctors to avoid administrative suspicion and protected many against litigation.

As concerns about Mexican immigration increased, Mexican women were increasingly subjected to coerced sterilization in public hospitals in Los Angeles. In New York City and to a lesser extent Chicago, physicians pressured Puerto Rican
women to undergo sterilization surgery. And on reservations, Native American women became targets of doctors employed by the Indian Health Service.

Sterilization abuse became a public issue in the summer of 1973 when the parents of two Alabama sisters, Minnie Lee and Mary Alice Relf, ages twelve and fourteen, filed a lawsuit to protest the coerced sterilization of their daughters. The lawsuit achieved national attention, inspired other victims to tell their stories and led consumer advocates, feminists, neighborhood leaders, and some physicians to investigate the incidence of sterilization abuse in their communities. It also motivated activists to take to the streets, the courts, and legislatures to demand regulation of contraceptive sterilization.

In 1975, ten Chicanas filed a civil lawsuit against the USC-LA County Hospital for coercively sterilizing them during childbirth between 1971 and 1974. The plaintiffs, who were poor and eligible for medical assistance but not receiving welfare, testified that they had been pressured by doctors, nurses and other hospital staff to consent to tubal ligations they did not want. Despite compelling testimony from plaintiffs as well as medical and academic experts, the judge in Madrigal v. Quilligan ruled that there was no evidence showing that the defendants – one the chairman of the Department of Obstetrics and Gynecology, the other a hospital administrator – had participated in the sterilizations directly. He blamed the plaintiffs for their surgeries, which he deemed the result of “miscommunication” between the parties.

**Remembering Eugenics in California**

Although several scholars had written about California’s record of coerced sterilizations, it was not until 2003, in the context of a legislative hearing convened by then-state Senator Dede Alpert, that the governor issued an apology for the more than 20,000 sterilizations carried out under the authority of state law. But unlike in Oregon, North Carolina, and Virginia, there was no one on the receiving end to accept it. At least in part because California’s state-sponsored sterilizations dropped off in the early 1950s, only one victim has come forward to tell his story. Attempts by the Department of Health and State Senate to locate sterilization victims for potential oral history interviews yielded no one.

Publicity related to the 2003 apology did not connect the sterilizations in state institutions to the coerced tubal ligations of women at USC-LA County Hospital.

In 2005, a well-attended one-day conference at California State University at Sacramento featured a range of talks on the history of eugenics and its implications for contemporary dilemmas related to genetics, reproduction, and disability rights. A small but visually powerfully exhibit about eugenics in California, “Human Plants, Human Harvest,” accompanied the event, and a special issue of *The Public Historian* with articles by several participants was published.
It was not until 2012 that the history of eugenics in California entered mainstream news again, prompted in large part by the extensive national coverage of potential reparations for sterilization victims in North Carolina. However, recognition of California’s eugenic legacy has continued to expand due to pioneering historical scholarship, and episodic media coverage, including investigative articles and editorials that have appeared mainly in local newspapers and on public radio. A documentary titled ¿Más Bebés? about the coerced sterilization of women in Los Angeles in the late 1960s and early 1970s is scheduled for release soon.

Addressing Historical Human Rights Abuses

Since the end of World War II, people often have demanded and governments sometimes have provided apologies, restitution, or reparations for what broadly can be termed human rights violations. To a great extent, the parameters for such recognition and compensation were established by the German government in the aftermath of the Holocaust. Examples include apologies in 1988 by President Reagan and Canadian Prime Minister Mulroney to citizens of Japanese origin or ancestry held in internment camps during World War II. In 1997 President Clinton apologized before a room of the remaining survivors for the Tuskegee Syphilis Study; in 2008 Australia apologized for the forced removal of aboriginal peoples from the late 1800s to the 1960s; and in 2010 the U.S. government apologized for experiments carried out in Guatemala by the Public Health Service from 1946 to 1948.

Eugenics has been the focus of a number of apologies and historical inquiries. In 2008 the United Methodist Church apologized for its support of eugenics, including the sponsorship of “fitter families” contests, and by association, sterilization. In 2009 the Czech government issued a public statement of apology for the sterilization of Roma women. In 1998 the Pope apologized for the Vatican’s inaction on behalf of Jews during the Holocaust.

Notable efforts to confront the legacy of coerced sterilization have taken place in five US states and two Canadian provinces. The most sustained is in North Carolina (where 8,000 coerced sterilizations were performed between 1929 and 1974), with extensive media coverage, an apology in 2003 by the governor, the placement of a historical marker, the creation of the North Carolina Justice for Sterilization Victims Foundation, and the current governor’s recent introduction of a bill that would provide $50,000 compensation for each living victim of eugenic sterilization.

The governors of California, South Carolina, Virginia and Oregon have also offered apologies. In Indiana, a group led primarily by scholars organized a series of events and activities including a symposium and a museum exhibit (which is now digital) to commemorate the 2007 centennial of the Indiana Sterilization Act. The premier of Alberta offered an apology for the eugenic sterilization of some 2,800 of its citizens between 1928 and 1972, and the government offered about $82 million
to one group of 246 victims. In British Columbia, lawsuits filed in 2001 against the
government alleging involuntary sterilizations resulted in an out-of-court
settlement in 2005 that awarded compensation to nine women. A group of scholars
and activists there has launched a eugenics archive to document this history, and
organized a Eugenics Awareness Week every October.

**Why this History Matters**

In our time as in previous eras, mainstream scholarship acknowledges past episodes of bad science or pseudoscience that were unduly influenced by political beliefs or social status. But this acknowledgment is accompanied by a tendency to believe that current science transcends social and political currents. Such assumptions ignore both the inevitable continuities of scientific research and the broader social, cultural, and economic context in which scientific values are embedded.

This pattern helps explain the temptation to downplay the continuing influence of eugenics. Yet even into the 1980s, the Singapore government explicitly funded a policy designed to ensure that wealthy families produced more babies, while discouraging poorer families. In the 1990s, Peru's government, with the help of international humanitarian organizations, sterilized approximately 500,000 indigenous women. Moreover, there are many subtle ways in which nations, regions, and other entities pursue similar strategies, while ignoring or denying any relationship to a eugenic "past."