

## California

### Number of Victims

In total, 20,108 people were sterilized in the state of California prior to 1964. California had by far the highest number of sterilizations in the United States (one third of all sterilizations nationwide). The numbers of men and women sterilized were about equal. Of the total sterilizations, almost 60% were considered mentally ill and more than 35% were considered mentally deficient. Men and women of Mexican origin represented between 7% and 8% of those sterilized (Stern, *Eugenic Nation*, p. 111). African Americans made up 1% of California's population but accounted for 4% of the sterilizations (Stern, *Eugenic Nation*, p. 111).

### Period during which sterilizations occurred

The first sterilization law was passed in 1909. From here, sterilizations occurred at a steady increasing rate until about 1950. Prior to 1921, there were 2,558 sterilizations and this rate continued to increase until around 1950. After 1950, the rate slowed, and only 85 sterilizations occurred after 1960. All recorded sterilizations appear to have occurred prior, but there is some evidence to support the claim that sterilizations may have been performed into the 1970s, through deception of patients and their guardians (see Stern, "Sterilized").

### Temporal Pattern of sterilizations and rate of sterilization

Sterilization rates started off fairly low with 12 sterilizations per year in the first 12 years after the passage of the 1909 law. However, after 1921, the rate soared to about 450 per year, or about 13 sterilizations per 100,000 residents per year. This rate held fairly constant until about 1950, when it began to level off. After this, sterilizations became fairly rare and did not happen with as much frequency. The last sterilization occurred in 1963.

### Passage of Laws

The first state sterilization law in California was enacted on April 26, 1909, by Governor James Gillett. (Gottshall; Laughlin, p. 1). This was the first of three laws passed in California and it targeted patients in state hospitals and institutions for the mentally retarded, as well as prison inmates. Of the prison inmates, those labeled sex offenders were the most commonly targeted. At the time of the passage of this law, the approval of the superintendent of the institutions, the superintendent of the state hospitals and the secretary of the State Board of Health were consulted. If two out of three of them approved, the sterilization could be carried out (Paul, pp. 256-257).

A second law was passed on June 13, 1913. This law repealed the first law and established different guidelines. (Laughlin, p. 2). It allowed for a wider range of people to be sterilized. Anyone who was "afflicted with hereditary insanity or incurable chronic mania or dementia" (Braslow, pp. 33-34) could be sterilized. This law also established the State Lunacy Commission, which had the power to order sterilizations. However, this law did call for parental consent in the case of the sterilization of minors (Braslow, p. 34).

The third law, enacted at the end of July, 1917, created modifications to the 1913 sterilization law by expanding the scope of who could be sterilized (Kline, p. 50). Two amendments were made to the 1913 law which included specific references to the Sonoma State Home and the Pacific Colony. (Laughlin, pp. 3, 7, 8). The law established the Pacific Colony and allowed the Board of Trustees of this institution to grant permission for sterilizations of those living there (Gottshall).

In both 1935 and 1937, legislation was drafted that would have established a State Eugenics Board and further expanded the state's authority to perform sterilizations to include inmates and residents of behavioral and other non-mental reformatory institutions. However, the bills failed and never became law (Stern, *Eugenic Nation*, p. 83)

In 1951, the laws were amended to require full authorization from the patient in order to perform sterilizations, and statements made by the Department of Mental Hygiene, and others, throughout the 1950s further affirmed the psychiatric movement away from sterilization. (Paul p. 267) These laws, combined, allowed eugenic sterilizations to occur in the state of California through 1964. (Gottshall).

In 1927, in an 8-to-1 decision, the United States Supreme Court upheld the constitutionality of Virginia's—and, by extension, California's—mandatory sterilization law in the case of *Buck v. Bell*. However, in 2003, the California Senate issued Senate Resolution No. 20 to apologize for California's eugenics laws (see Center for Science, History, Policy, and Ethics).

### **Groups identified in the Law**

The 1909 law was aimed specifically at those in prisons and with mental disabilities that caused them to be institutionalized. Of those with mental disabilities, the law targeted patients in state hospitals and institutions of the feeble-minded. In terms of the prisoners, the law targeted those who were inmates for life, showing “sex or moral perversions”, or were certain repeat offenders (Gottshall; Laughlin, p. 7). The 1913 law expanded to target all inmates in state hospitals or homes for the feeble-minded (except voluntary patients in state hospitals), as well as all repeat offenders in state prisons (Laughlin, p.7). The 1917 amendments greatly expanded the groups targeted even further to include those who had hereditary mental diseases, “those suffering from perversion or marked departures from normal mentality”, and those with sexually-transmitted diseases (Laughlin, pp.7-8). These two later laws expanded to include virtually any individual deemed unfit. Out of those sterilized, 70% were labeled as mentally ill (Paul, p. 261).

### **Process of the Law**

In 1909, in order to legally sterilize someone, the approval of any two of the three following individuals was required: the superintendent or resident physician of the institution, the superintendent of state hospitals, and the secretary of the State Board of Health (Gottshall). If these approvals were given, sterilization could occur (Gottshall). In 1913, the jurisdiction over sterilization in California expanded to include the “State Lunacy Commission” and gave it the authority to order the sterilization of an individual with certain mental illnesses. In 1917, after the establishment of the institution called the Pacific Colony, which dealt with the sterilization of epileptics and mentally delayed individuals,

authorization for sterilization changed. It required the authorization by a Board of Trustees, and a clinical psychologist with a Ph.D. (Gottshall). For all, although consent from the sterilized individual or their family was not required, it was usually received (Butler). However, many individuals may have given consent so that they would be allowed to leave the hospital (Braslow, p. 43). Neither records nor reports were required by any of the California sterilization laws to be kept (Laughlin, p. 137).

### **Precipitating Factors and Processes**

Around the turn of the century, increased immigration of Chinese and Mexicans led to changes in California's demographics (Stern, *Eugenic Nation*, pp. 57-59). Especially important was the influx of Mexicans looking for work. Their presence cost the state a lot of money in charity and welfare. This began a process of trying to keep the undesirable Mexicans out of the United States (Stern, *Eugenic Nation*, pp. 57-59). As a result, progressives began to look for a way to easily eliminate degeneracy and disorder in the new chaos (Gottshall). European settlers sought to establish a community, based on modern science, which fulfilled the Manifest Destiny and downplayed the Spanish and Mexican past of the territory (Stern, *Eugenic Nation*, p. 85). Furthermore, African-American men were seen as being excessively virile and this needed to be controlled to protect women (Kline, p. 9). Similarly, the idea of "race suicide" emerged on a national level. This concept stated that women of good stock should be having children in order to ensure that the white middle class not be taken over by inferiors (Kline, p. 11).

The changing economy led to changing gender roles in society. As the economy became more corporate, white men were becoming perceived as less masculine due to the desk jobs they often occupied (Kline, p. 9). At the same time more and more women began to work outside of the home. These women were seen as overly sexual and challenging to the traditional roles of middle class women (Kline, pp. 10-11). Many doctors were concerned with women giving birth out of wedlock. This caused doctors to sterilize some women in order to prevent this from happening (Braslow, p. 47). Progressive Era reformers saw these changes and began to implement eugenic programs to help "better" society (Stern, "Sterilized," p. 1129).

The driving force behind the statutes regarding sterilization in California were mainly eugenic in nature, but they were also designed to benefit inmates in a physical, mental, moral, or therapeutic manner. There was a somewhat punitive motivation behind them, as well. (Laughlin, p.7) After World War I, and the conversion of feeble-mindedness from a crime to a disease, there was a noted shift across the country from "institutions" to "hospitals" and "inmates" to "patients". (Kline, p. 45) In the waning years of sterilization in California, the rationale shifted from eugenics to "fears of overpopulation, welfare dependency, and illegitimacy" (Stern, "Sterilized," p. 1132).

### **Groups Targeted and Victimized**

The most commonly targeted groups were those with mental illnesses. These included alcoholics, epileptics, individuals with Down's syndrome, the insane, and those who were manically depressed (Gottshall). The range of those targeted was expanded as the result of the laws over the years. These individuals were disproportionately female and racial minorities. Women who were seen as sexually promiscuous were often sterilized as a "cure" for their actions (Kline). Mexicans and African Americans were also disproportionately sterilized (Stern, *Eugenic Nation*, p. 111). Inmates in prisons,

especially those whose crimes were sexual in nature, were targeted in the early years of the program. Later, the focus shifted primarily to target those with mental illnesses (Gottshall).

However, in practice, the law was also applied to many others, ranging from alcoholics to paupers to people infected with syphilis (Center for Science, History, Policy, and Ethics, see Senate Resolution No. 20). Of those the Sonoma State Home sterilized through June 30, 1916, about half were characterized as “manic depressive”, with another third characterized as either having “dementia praecox” or being epileptic (Laughlin, p.53). In addition, rather than sterilize them, the Sonoma State Home participated in a program to deport “mentally defective” immigrants—at a rate of about 37 immigrants per year, with about half being Mexican or Filipino (Kline, p.59).

### **Other Restrictions placed on those identified in the law or with disabilities in general**

Many of those who were released went on to live relatively normal lives. They were married, and although without children, were able to support themselves (Butler). Although they were not in fact disabled, Mexicans were disproportionately targeted. Many were targeted because of the traditionally large families of Mexican Americans. In order to prevent an increase in their numbers, sterilization was often utilized (Stern, “Sterilized,” p. 1132).

### **Major Proponents**

Paul Popenoe was raised in California and studied Biology. As a journalist, he wrote columns promoting eugenics. He believed that charity was the reason society had so many degenerates that had survived for so long. He conducted extensive research about I.Q.’s and the individuals who had been sterilized in order to promote the cause (Stern, *Eugenic Nation*, pp. 105-107). Working with E.S. Gosney, he researched California’s eugenic institutions and helped promote the program (Braslow, p. 41). Although he continued to work on Eugenics for the rest of his life, he eventually had to denounce negative eugenics as it fell out of favor in the 1940s (Stern *Eugenic Nation*, p. 106).

E.S. Gosney was a philanthropist who helped to finance and promote the eugenics program (Popenoe). He worked along with Popenoe to collect data about sterilizations by researching California’s state institutions. He helped fund and create the Human Betterment Society for well-known wealthy individuals who supported eugenics. Unlike many eugenic supporters of the day, his focus was primarily on the benefits for society, not the benefits for the individual (Braslow, p. 41).

F.O. Butler was the superintendent of Sonoma State home starting in 1918. He believed that sterilization benefited both the individuals and society as a whole (Butler). Both through public promotion and actual operations, he was largely responsible for thousands of sterilizations. He himself is estimated to have performed at least 1000 sterilizations throughout his career (Kline, p. 52).

Charles M. Goethe was a businessman from Sacramento who promoted eugenics in the San Francisco area (Stern, “Sterilized” p. 1129). He advocated for eugenic policy including immigration restriction, “better breeding”, and sterilization. With a background in plants and animals, he viewed eugenics as a

way of improving the human race (Center for Science, History, Policy, and Ethics).

Frederick W. Hatch, Jr. was the secretary of the State Lunacy Commission in California. After the sterilization law was passed in 1909, he became the General Superintendent of State Hospitals. He held this position for the rest of his life, using it to implement policy and hire hospital administrators in favor of eugenics. While he held this position, about 3,000 people were sterilized in California (Gottshall). Even after his death in 1924, his legacy of an active program for sterilization lived on through the next hospital superintendents.

Ulysses S. Webb was the attorney general of California during much of the Progressive Era, holding that position for 37 years. He was confident that eugenic sterilization laws, especially those requiring some form of consent, would survive a challenge by the courts. He preferred that sterilizations be used as a medical treatment, rather than as a punishment by the courts. (Gottshall)

### **“Feeder Institutions” and institutions where sterilizations were performed**

(Photo origin: Alex Wellerstein; available at <http://www.people.fas.harvard.edu/~wellerst/collection/>)

The Sonoma State Home was a state hospital founded in 1884 designed to help educate mentally disabled children. Many of these children were those who got into trouble at home (Kline, p. 34). With the advent of eugenics, the home began to grow in size and prestige. So as not to be a burden to the public, Sonoma was self sufficient by having the residents grow gardens and take care of themselves and each other (Kline, p. 36). As time passed, it soon became the central area for sterilization with less emphasis on helping the patients (Kline, p. 37). It was especially focused on sterilizing women who were considered sexually deviant. Many of these women were considered such because they had sex outside of marriage (Kline, pp. 55-57). Still open today, renamed the Sonoma Development Center, there is no mention of the past on the website (State of California).

The Pacific Colony was an institution that was created under the 1917 sterilization law and it dealt with the sterilization of epileptics and mentally delayed individuals. This was created as a result of the apparent growing number of “feeble-minded” individuals. On March 20, 1921, the first patients were admitted to Pacific Colony with an expected capacity of 50 patients. However, due to a lack of water and limited access to the colony, it soon became inappropriate for their needs and the facility closed on January 23, 1923.

By 1921, in addition to the Sonoma State home, several state hospitals performed sterilizations of some kind. These included the state hospitals in Stockton, Napa, Agnews, and Norwalk; the Mendocino State Hospital in Talmage and the Southern California State Hospital in Patton. In total, there were 3, 939 sterilizations performed at the six state hospitals (Barslow, p. 35).

The California State Hospital at Stockton performed the largest amount of sterilizations out of the six state hospitals. Prior to June 1926, physicians at Stockton had performed over ten times as many sterilizations as at Agnews State Hospital, accounting for almost 40% of the total amount performed up to this date (Barslow, p. 36). The large-scale sterilization at Stockton was made possible because the physicians at Stockton believed in the medical value of sterilization and demonstrated this conviction in

their work. Even though these doctors did have hereditarian beliefs, these were not the ones that guided their decision to operate. They genuinely believed that patients that had undergone sterilization showed “marked improvement” (Barslow, p. 38). Rather than seeing sterilization as a way to prevent the degeneration of the human stock, these physicians saw the surgery as an intervention aimed at improving the individual’s life. The belief in therapeutic benefits allowed for male sterilization prior to the 1930s to escalate. Doctors believed that the patients felt mentally and physically stronger after the surgery. Although this belief waned by the mid-1930s, it made it possible for more sterilizations to occur. In addition, patients shared the belief that sterilization was therapeutic, making it easier to perform the operation (Barslow, p. 44). This belief was also demonstrated in the sterilization of women. Sterilization of women was guided by the belief that they were protected from psychological and social strains of childbirth and motherhood (Barslow, p. 46). This is what made Stockton unique. At Stockton, sterilization functioned as a alleged solution to a patient’s individual problems on a large scale (Barslow, p. 51). The Stockton State Hospital closed in 1996 and its ground is now part of the Stockton campus of California State University, Stanislaus.

Finally, state prisons in California also participated in the sterilization of individuals, although on a much smaller scale. San Quentin and Folsom Prisons conducted some sterilization on inmates who were convicted of crimes of a sexual nature (Gottshall). The Folsom State Prison and the Preston School of Industry in Waterman began performing sterilizations as of January 1, 1921 (Laughlin, p. 52).

## **Opposition**

Proponents of sterilizations met very little opposition to their ideas. They marketed it as good for society and the individuals sterilized. Towards the later part of the eugenics movement, activist groups began protesting the injustices committed against their members. These included both African Americans and Mexicans in the 1950s and 1960s (Stern, “Sterilized,” p. 1134). There were also two court cases that challenged the sterilization law. The first of these was the Hewitt case in which a young woman was sterilized against her will but with the consent of her mother. However the case was not brought to trial (Paul, p. 262). The second case, known as the Garcia case, involved a petition to end the enforcement of the sterilization law. This case was also not heard because it supposedly lacked any facts justifying a hearing (Paul, pp. 265-266).

## **Commemoration**

In the fall of 2005, California’s first ever exhibition of the state’s eugenic history was run for four weeks at the Library Gallery at California State University Sacramento. The exhibit was called “Human Plants, Human Harvest: The Hidden History of California Eugenics.” The public is unaware of this history and there was no common background or knowledge on the subject upon which to build an exhibition. Therefore, the exhibit took the visitors through a series of seven sections of visual chapters of flat wall-pieces that were mounted in between two huge sheets of Plexiglas. The exhibit utilized high-quality reproductions of historical photographs and documents (Brave and Sylva, p. 38). These images, although they spark interest, had to be used carefully because they range from “ludicrous to loathsome” and therefore had the potential to be viewed as illegitimate pieces of information (Brave and Sylva, p. 39). Since the images served as the major carriers of information to the visitors, it was necessary to secure the visitors’ trust that this history did actually happen.

This exhibit was created for several reasons. One is that the eugenics movement has been underrepresented in visual media, while there has been many books published and read on the issue. As a visual culture, a visual representation is necessary in order to reach the public. It was also created because people were concerned that California's history of eugenics would remain unknown. However, some resisted the uncovering of this information because they saw the exhibit as being perceived as more "feel-bad" than "feel-good" (Brave and Sylva, p. 42). Overall, however, many visitors viewed the exhibit as both eye-opening and shocking, as "powerful and beautiful in its truth telling" (Brave and Sylva, p. 43). There is no memorial for the 20,108 people sterilized in California, and other than a governor's apologies for the past, this is the first public commemoration of California's eugenic past.

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